



**INCIDENCES, SYMPTOMS AND LONG-TERM HEALTH
EFFECTS OF TRAUMA ON PRIESTS-VICTIMS OF
INSECURITY AND INSURGENCY IN NIGERIA**

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Abstract

The study investigated incidences, symptoms, and long-term health effects of insecurity and insurgency trauma on Catholic Priests specifically in northern Nigerian states. Survey research design was adopted for the study with a sample of 48 Priests from selected Catholic Dioceses in Northern Nigerian states. Three research questions guided the study. A 37-item four-point Likert scale research questionnaire constructed by the researcher were employed to collect data for the survey. The data obtained from the respondents were analyzed using frequency counts and percentages. The findings indicated that major trauma incidences and symptoms of trauma had high percentages. Based on the findings, the researcher recommended that more trained counsellors should be employed by both Government and Church authorities in all the northern states and in all the Dioceses concerned in northern Nigeria states, to help the Priests-survivor victims of insecurity and insurgency towards their wholistic coping emotional development and that of all other insurgency-survivor victims across Nigeria.

Key words: Insurgency, priests, symptoms, trauma, victim.

Introduction

The spate of insurgency and insecurity in northern Nigerian states nowadays is alarming and imposing a serious trauma on the populations in the northern Nigerian states. One of the major sections of the populations in these northern states of Nigeria that is experiencing this alarming and imposing trauma experiences, are the Catholic Priests-survivor victims of herdsmen killer-kidnappers in all the catholic Dioceses of Northern Nigeria. Fulani Herdsmen Killer- kidnappings is just one of the devastating faces of insurgency and insecurity that has terribly impacted on populations across Nigeria. This is a very serious issue that has given birth to severe Psychological and mental health experiences that has implications for counselling and psychotherapy in Nigeria today.

The term “trauma” originated from Greek word (“wound”). Wound can be discussed in the perspective of both physical and psychic wounding, but this study is concerned more with the psychological undertone. Trauma is a type of negative or unpleasant emotion. It is an emotional response someone has to an extremely negative event whose effect can be so severe that they interfere with an individual’s ability to live a normal life (APA, 2019). The Diagnostic and Statistical Manual of Mental Disorder (DSM) in Tull (2019) defined the elements of trauma within the framework of Post-Traumatic Stress Disorder (PTSD) as exposure to actual or threatened death, or serious injury which the exposure may result from situations in which the individual: Directly experiences the traumatic event, Witnesses

the traumatic event in person, Learns that the traumatic event occurred to a close family member or friend and Experiences firsthand, repeated, or extreme exposure to aversive (unpleasant) details of the traumatic event.

Trauma is a toxic condition, a mixture of intense anxiety, absolute helplessness, and a loss of control (Peichl, 2007). The mental imprint of frightening experiences may take the form of memory loss, identity loss or unconsciousness, in which case, if the impact remains unresolved could lead to permanent damage. Perception plays an important role to frightening experiences. Levine (2005) maintained that perception of an event by an individual determines the nature and extent of the impact it has on the person. Trauma occurs when a person is overwhelmed by events and responds with intense fear and helplessness. It is a response in relation to perception, proving why two people can experience same traumatic event or circumstance and be impacted in different ways. Emotion seems to rule every human life as people make decisions based on their state of mind, whether they are angry, sad, happy, frustrated, or traumatized. Our emotional state is therefore precipitated by the situation we find ourselves. Mangal (2013) stated that emotion would prove to be helpful or harmful depending on its intensity/frequency, situation, and the type. He stressed that negative emotions are harmful to an individual's development. Traumatic events include the deadly and destructive activities of insurgents which include wanton killings and kidnappings of innocent people in their communities as is the present situation in not just northern part, but across all states in Nigeria now. Corsini (2002) described traumatic events as situations such as: rejection, divorce, combat experiences, civilian catastrophes, and racial or religious discrimination. Psychologists like Scaer (2005) have traced the effect of trauma to the brain and its subsequent inhibition to human activities. When one is overwhelmed by traumatic experience or he/she is repeatedly being subjected to or witnessed distress, his/her coping mechanism can be overloaded. The overloading may in turn result to disturbing experiences remaining frozen or unprocessed in the brain. Such unprocessed memories and feelings are stored in the limbic system of the brain in a "raw" and emotional form. The limbic system maintains traumatic memories in an isolated memory network, associated with emotions and physical sensations. When the individual experiences events like the one he/she has been through, the limbic system's traumatic memories will trigger. The memory itself may be long forgotten but the painful feelings such as anxiety, panic, anger, or despair are continually triggered in the present, inhibiting the individual's ability to live in the present and learn from new experiences.

Confirming the effect of trauma, Sutton (2002) explains that the sensory overload occurring during a traumatic event can indeed result in lasting damage to brain process. The implication is that alteration of neurological processes can result to certain psychological and physical symptoms which are aversive to human development. Some of the symptoms are identified as: shock, anger denial, mood swings, guilt, shame, anxiety, fear, withdrawing from others, depression, despairing, feeling numb, emotional overwhelm, difficulty concentrating. The physical symptoms may include nightmares, racing heartbeat, fatigue, muscle tension, edginess, agitation aches, pains, and others.

The Problem Statement

The spate of insurgency and insecurity in northern Nigerian states nowadays is alarming and imposing a serious trauma on the populations in these states. One section of the populations in these northern Nigerian states that is experiencing this alarming and imposing trauma

experiences, are the Catholic Priests, and Priests-survivor victims of herdsmen kidnappers in almost all the catholic Dioceses of Northern Nigeria. Fulani Herdsmen Killer- kidnappings is just one of the devastating faces of insurgency and insecurity that has terribly impacted on populations across Nigeria. This is a very serious issue that has given birth to severe Psychological and mental health experiences on populations which has implications for counselling and psychotherapy in Nigeria today. Herdsmen killings and kidnappings in northern Nigerian States is being perpetrated by the so-called Fulani herdsmen on mostly the Christians, of which Catholic priests (and protestant pastors in some cases) have become major targets by these so-called herdsmen killer-kidnappers of recent. There have been on going herdsmen killer-kidnappers' select killings and kidnappings in many parts of northern Nigeria states like Southern Kaduna communities in Kaduna state, east-southern communities in Niger state, Katsina and Sokoto States for quite some time by the insurgents (so called herdsmen militia). But the most recent targeted spate of insurgent killings and kidnappings of Catholic Priests across Nigeria is alarmingly disturbing. The latest death toll of Priests killed in 2022 by so-called Fulani herdsmen killer-kidnapper terrorists was 45 apart from those kidnapped in several attacks across the entire country as reported by Udeh Chinenye and SB Morgan in Opera online official news platform of 23rd Jan 2023. "At least 45 Nigerian Catholic priests were killed, and 30 others were kidnapped in 39 terror attacks in 2022, according to a report released by SB Morgan. According to the report, it was gathered that the death rate in the North Central is the highest with 12 casualties, followed by 9 in the Northwest, 5 in the Southeast, 5 in the South, 4 in the Northeast, and 4 in the Southwest region. It was further revealed that the 39 terror attacks recorded against the priests were 28 kidnappings, 3 herdsmen attacks, 2 attacks from IPOB militants, one mob violence, and one banditry attack." The report shows that the northern States of Nigeria have the highest number of killed and kidnapped catholic Priests in Nigeria. With several Priests and Priests-survivor victims of kidnappings traumatized and suffering lots of mental health issues in most dioceses in northern Nigeria, the pastoral life, and activities of their priestly ministry is badly affected.

Also, the populations in their communities are traumatized and the young adolescents who are the future leaders of tomorrow are badly affected. Those priests and other populations not yet affected are already overtaken by fear and anxiety of the news of insurgent attacks from their neighbouring communities. Those already affected and traumatized seem to have lost hope in life with feelings of abandonment and despondency. The attacks by the insurgents in Kaduna, kano, Sokoto, kafanchan, Jos, Yola, Maiduguri, Minna, Kontagora, Zaria, and Bauchi dioceses- all in northern Nigeria, have led to death of dozens of Priests, kidnapping of many Priests and huge ransom payments for the release of such priests' victims in these dioceses. Most of the kidnapped Priests-survivor victims are terribly traumatized without any professional counselling or psychological help to enable them cope with such trauma. Worst still, their pastoral and spiritual life is damaged as they are not able to attain to the pastoral needs of their parish communities. Some Parishes have been closed, and many mission and government schools have been shut down and many villages deserted. Some of these deserted school buildings have been converted to shelters temporarily for Internally Displace Persons (IDPs). The Catholic priests being exposed to traumatic experiences and the interruption of their priestly duties associated with armed conflict has detrimental consequences for their mental health and psychological well-being. These traumatized priests are badly affected by Post-Traumatic Stress Disorders (PTSD) such as irritability, insomnia, sleeping disorders, fear, aggression, confusion, and an inability to concentrate in

their priestly duties. Some have dropped out entirely from their Priestly functions as they undergo rehabilitation. Some Priests who survived murder attempts by the so-called Fulani herdsmen (as in some cases in Kaduna, Kano, Kafanchan, Sokoto, Zaria, Maiduguri, and Minna dioceses), have been taken in to hiding, for them to get adequate rehabilitation. This greatly affects their ability to have a loving relationship with their parishioners, families, and friends and to perform well in their priestly ministry.

Because Priests are community leaders and community Builders of people's consciences and characters, once the mental health of a Priest is negatively affected, it will certainly affect the life of the entire community which he the priest serves. Hence, you have a situation of sadness, despondency, crisis fatigue among parish populations whose priest have been kidnapped or killed. These kidnapped Priests-survivor victims are terribly traumatized without any professional counselling or psychological help to enable them cope with such trauma. Worst still, their pastoral and spiritual life is damaged as they are not able to attain to the pastoral needs of their parish communities anymore. Trauma is a painful emotional experience that may produce a lasting psychic effect and, sometimes, a neurosis. The insurgency and insecurity being experienced by the citizens in Northern Nigeria among whom are the Priests-survivor victims of Fulani herdsmen kidnapers, are traumatizing. Its effect is far reaching, it is constituting to the Priests' insecurity and psychological imbalance, as well culminating to their Priestly work derailment. The spate of killings, displacement, rape, abduction, and the like has left much to be desired. The situation in all its ramification calls for concern to avert more devastating effect. Hence this study sets to find out if there are incidences of insecurity and insurgency in northern Nigerian catholic dioceses, and whether Priests and Priests-survivor victims of herdsmen kidnapers are aware of trauma symptoms and trauma coping strategies in their traumatic experiences that could help them cope amidst increasing herdsmen killer kidnapers' threats in present day northern Nigeria. And also, to find out if there are available trained trauma counsellors provided by the northern states Governments or the Church authorities to help cushion Priests-survivor victims of herdsmen Killer-Kidnapers in northern Nigerian states.

Review of Relevant materials

Increasing Insurgency and Insecurity activities in northern States of Nigeria

Insurgency is a violent attempt to take a government of a country by its citizens. Hayden (2007) defined insurgency as an organized movement aimed at the overthrow or destruction of a constituted government using subversion, espionage, terrorism, and armed conflict. Insurgency in Kaduna state with southern Kaduna (with a concentration of Christians) mostly hit frequently, is being perpetrated by the Fulani herdsmen on mostly the Christians, of which Catholic priests (and protestant pastors in some cases) have become major targets by these so-called herdsmen killer-kidnapers of recent. There have been on going insurgency select killings in many parts of Southern Kaduna villages for quite some time by the insurgents (so called herdsmen militia). But the most recent spate of insurgent killings and kidnappings of Catholic Priests in almost all the northern States of Nigeria is alarmingly disturbing.

The latest death toll as at (23rd of Jan 2023) of this mindless carnage by insurgents on catholic priests across Nigeria had already surpassed 45, as reported by Udeh chinenye in Opera online news platform of 23rd Jan 2023, in a report released by SB Morgan. With several Priests traumatized and suffering lots of mental health issues in most dioceses of northern Nigeria, the pastoral life and activities of their priestly ministry in their parishes is

badly affected. Also, many people in their communities are traumatized and the young adolescents who are the future leaders of tomorrow are badly affected. Also, many school children are being denied their basic rights to education as many schools and communities have been closed and communities deserted for safety zones, with thousands ending up in different IDPs camps. Those not yet affected are already overtaken by fear and anxiety of the news of insurgent attacks from their neighboring communities. Those already affected and traumatized seem to have lost hope in life with feelings of abandonment and despondency. The attacks by the insurgents in Kaduna, kano, Sokoto, kafanchan, Jos, Yola, Maiduguri, Minna, Kontagora, Zaria, and Bauchi dioceses- all in northern Nigeria, have led to death of dozens of Priests, kidnapping of many Priests and huge ransom payments for the release of such priests' victims in the above-mentioned dioceses. Most of the kidnapped Priests survivor victims are terribly traumatized without any psychological help to enable them cope with such trauma. Worst still, their pastoral and spiritual life is damaged as they are not able to attain to the pastoral needs of their parish communities. Some Parishes have been closed, and many mission and government schools have been shut down and many villages deserted. Some of these deserted school buildings have been converted to shelters temporarily for Internally Displace Persons (IDPs). Worst of all is the fact that even school students are being kidnapped and huge ransom must be paid. Still worst is that these herdsmen killer-kidnappers have taken over many of the abandoned schools in the interior villages for their abode where they keep kidnapped victims who may be sick for easy access to medications as one of the kidnapped priests was kept in one such abandoned village school.

The Catholic priests being exposed to traumatic experiences and the interruption of their priestly duties associated with armed conflict has detrimental consequences for their mental health and psychological well-being. These traumatized priests are badly affected by Post-Traumatic Stress Disorders (PTSD) such as irritability, insomnia, sleeping disorders, fear, aggression, confusion, and an inability to concentrate in their priestly duties. Some have dropped out entirely from their Priestly functions as they undergo rehabilitation. Some Priests who survived murder attempts by the so-called Fulani herdsmen (as in some cases in Kaduna, Kano, Kafanchan, Sokoto, Zaria, Maiduguri, and Minna dioceses), must be taken in to hiding for them to get adequate rehabilitation. This greatly affects their ability to have a loving relationship with their parishioners, families, and friends and to perform well in their priestly ministry. Because Priests are community leaders and community Builders of people's consciences and characters, once the mental health of a Priest is negatively affected, it will certainly affect the life of the entire community which he the priest serves. Hence, you have a situation of sadness, despondency, crisis fatigue among parish populations whose priest has been kidnapped or killed.

The effect of insurgency trauma on populations is evidently noted in several studies carried out in different countries of similar scenarios like that of Nigeria in the world. A study was conducted on 796 children living in the occupied West Bank and Gaza, an area affected by armed conflict, the children were found to have behavioural and psychological problems such as depression and fears, a tendency to be disobedient and to engage in fighting, and to suffer from sleep disturbances, nightmares, and low self-esteem. It was discovered that children in Sri Lanka who suffered traumatizing experiences during the prevalent armed conflict suffered from PTSD, and both their memory tests and their school grades demonstrated a significant impairment of their cognitive development. It has also been

shown that children of school age in Rwanda exposed to the 1994 genocide experience had a drop in educational achievement (Akresh, R. & De-Walque, D. (2008). (2008).

This is the type of danger and tendency that the insurgency activities posed to not just the Priests in dioceses in northern Nigeria, but also the people living in such northern states' environments especially as the insurgent attacks continue. These Priests-survivor victims of insurgent killer-kidnappers need psychotherapeutic attention and other support to cope and survive their traumatic experiences. Traumatic experiences can have significant psychological effect on the wellbeing and overall development of any traumatized priest. Trauma can lead to destructive behaviours like addiction to drugs and alcohol, mental health issues, loneliness and isolation feelings, suicide ideation etc. in Priests who suffer from untreated trauma. The priest as we know have vital roles to play in the dynamics and complexity of the contemporary society. The Priest as the leader of other leaders and people that make up every community has the responsibility of developing coherent and methodological approach to solving societal problems through functional pastoral programmes and social teachings of the church and adequate observation of all societal laws or regulations. The priest in his priestly duties helps people in his community to develop knowledge and skills, learn to manage emotions and relationships, and acquire attributes and abilities that will be important in ensuring harmony and progress in the society. Unfortunately, the situation is at per with what the Priests are facing in all Dioceses in northern Nigeria nowadays. From the researcher's interaction with priests-survivor victims who suffer trauma and their experiences, Priests who suffer from trauma have an inability to cope or process their emotions successfully. Some may withdraw from friends and families, unable to sleep, to concentrate, break rules intentionally, act out, get involved in addiction and the like. Trauma may lead to mental disorders which include PTSD, depression, and anxiety.

The foregoing is the typical situation of the priests-survivor victims of herdsmen kidnappers in dioceses in northern Nigeria. The Priests in many dioceses in present day northern Nigeria are directly experiencing and witnessing kidnappings, killings, and ongoing community violence (on not only the priests but also their parish members), religious bigotry, instability at homes, physical abuses of their parishioners as a result of uprising insurgency and insecurity in the various communities they are working. Some priests who survived their kidnapping experiences or who survive insurgent attacks have had to leave their places of work and are squatting in other parishes as people have been chased away by armed bandits. Sargent, (2009), listed community violence as an instigator of trauma either by direct experience or being witnessed by the victim.

Longer-Term Health Effects of Trauma

According to Nature Phd, cited by Emma Penrod (2022), In some cases, a traumatic event may have longer-term implications, particularly if the trauma took place during childhood. Children who are exposed to trauma may have a decreased sense of fear or pain and may have trouble processing sensory input, even though they are less likely than adolescents and adults to develop PTSD. Adults may have trouble with attention and short-term memory, even when the new memories are not related to the trauma itself, because of changes triggered in the brain by the traumatic event. These effects may improve with treatment. Traumatic experiences may also be tied to physical symptoms, especially chronic sleep, gastrointestinal, cardiovascular, neurological, musculoskeletal, respiratory, dermatological, and urological problems. These symptoms may persist even after tests reveal no physical

explanation. And longer-term emotional symptoms of trauma may include irritability or hostility, depression, mood swings, anxiety, grief, shame, and emotional detachment.

Trauma Counselling

Trauma counselling is the emotional support given to clients who suffer from trauma by trained trauma counsellors/therapists. There are many trauma counselling models whose objectives are to help a traumatized individual make sense of what has happened to him/her and make him/her to begin to live in the present rather than constantly being re-triggered by the past.

Purpose of the Study

The main purpose of the study was to determine if there are incidences of insecurity, and symptoms of insecurity and insurgency trauma on Catholic Priests victims of insurgency and insecurity who are facing the challenges of insurgency and insecurity in Northern Nigeria. The specific objectives are to:

- To find out if there are incidences of killings and kidnappings of Catholic Priests in Northern Nigerian states of Nigeria.
- To determine symptoms of trauma on the Catholic priests-survivor victims of insecurity and insurgency in northern states of Nigeria.
- To investigate the long-term health effect of insecurity and insurgency trauma on the Priests-survivor victims of insecurity and insurgency in northern states of Nigeria.

Research Questions

The following research questions guided the study

- Are there incidences of of killings and kidnappings of Catholic Priests in northern Nigerian states?
- What are the symptoms of trauma on the Catholic priests-survivor victims of herdsmen kidnappers in northern Nigerian states?
- What are the Longer-Term Health Effects of Trauma on the Priests-survivor victims of herdsmen kidnappers in northern states of Nigeria?

Methodology

The research design employed for this study is survey. The population was made of the priests-survivor victims of herdsmen killer- kidnappers in all catholic dioceses of northern Nigerian states. A total of 48 Priests-survivor victims of herdsmen kidnappers from the dioceses of Kaduna, Zaria, Sokoto, Minna, Kafanchan, Kano, Yola, Maiduguri, Jos, Bauchi, and Kontagora were sampled through Purposive random sampling from the targeted population. The instrument for the study was a Four-point Likert scale questionnaire titled "Incidences, Triggers and Effects of Trauma on Priests-survivor victims of Insurgency in Nigeria" (ITETPIN). The items were constructed by the researcher and validated by experts in the Faculty of Education, Veritas University, Abuja who modified and updated the instrument to assure its validity. The reliability of the questionnaire was assessed using Cronbach's Alpha. The acquired value of 0.75 was sufficient to determine its dependability. The instrument was administered by the researcher with the help of eleven research assistants. The questionnaire was collected on the spot to avoid any form of loss or bias from

the respondents. The data collected was analyzed using frequency counts, percentages to present the answers to the research questions.

Results

The three research questions earlier raised in the study were answered descriptively using percentages.

Research Question 1: What are the incidences of kidnappings of Catholic Priests in northern Nigerian states?

Table 1: Percentage analysis showing incidences of kidnappings of Catholic Priests in northern Nigerian states

S/N	Item	Victims' Responses			
		Yes		No	
		F	%	F	%
1	Two Catholic priests serving in the Catholic Diocese of Sokoto, northern Nigeria, were abducted by unidentified gunmen on the 25 th May, 2022 kidnapping incidence	48	100.0	-	-
2	Two Catholic priests were kidnapped also in July, 2022 at Lere Local government Area of Kaduna state	48	100.0	-	-
3	Fr. Emmanuel Silas was kidnapped on 4 th July, 2022	48	100.0	-	-
4	Fr. Abraham Kunat was kidnapped on the 9 th November 2022	48	100.0	-	-
5	Fr. Anthony Dawah was kidnapped in 2022 in Kaduna	48	100.0	-	-
6	Fr. Francis Awesu was kidnapped in 2022 at St John Paul II parish Gadanaje	48	100.0	-	-
7	Fr. Joseph Akete was kidnapped in 2022 in Kaduna	48	100.0	-	-

n = 48

Table 1 showed incidences of kidnappings of Catholic Priests in northern Nigerian states. From the Table, item 1 revealed that all (100.0%) the respondents agreed that two Catholic priests serving in the Catholic Diocese of Sokoto, northern Nigeria, were abducted by unidentified gunmen on the 25th May, 2022 kidnapping incidence. Item 2 revealed that all (100.0%) the respondents agreed that two Catholic priests were kidnapped also in July, 2022 at Lere Local government Area of Kaduna state. Item 3 revealed that all (100.0%) the respondents agreed that Fr. Emmanuel Silas was kidnapped on 4th July, 2022. Item 4 revealed that all (100.0%) the respondents agreed that Fr. Abraham Kunat was kidnapped on the 9th November 2022. Item 5 revealed that all (100.0%) the respondents agreed that Fr. Anthony Dawah was kidnapped in 2022 in Kaduna. Item 6 revealed that all (100.0%) the respondents agreed that Fr. Francis Awesu was kidnapped in 2022 at St John Paul II parish Gadanaje. Item 7 revealed that all (100.0%) the respondents agreed that Fr. Joseph Akete was kidnapped in 2022 in Kaduna. Therefore, there was a very high percentage of kidnapping of Catholic Priests in northern Nigerian States.

Research Question 2: What are the symptoms of trauma on the Catholic priests-survivor victims of herdsmen kidnapers in northern Nigerian states?

Table 2: Percentage analysis showing symptoms of trauma on the Catholic priests-survivor victims of herdsmen kidnapers in northern Nigerian states

S/N	Item	Victims' Responses			
		Yes		No	
		F	%	F	%
8	Having trouble functioning effectively in their daily Parish pastoral work	46	95.8	2	4.2
9	Suffering from severe fear, anxiety, or depression due to insecurity incidences being experiences	48	100.0	-	-
10	Unable to form close, satisfying relationships with other diocesan Priests and Parishioners	48	100.0	-	-
11	Experiencing terrifying memories, nightmares, or flashbacks of insurgency activities in the environment they live	48	100.0	-	-
12	Avoiding more and more anything that reminds them of other traumatic experiences	48	100.0	-	-
13	Emotionally numb and disconnected from other diocesan Priests and Parishioners	45	93.8	3	6.2
14	Using alcohol or drugs to feel better	40	83.3	8	16.7
15	Having feelings of unnecessary fatigue always	42	87.5	6	12.5
16	Being startled easily always	45	93.8	3	6.2
17	Having difficulty concentrating when celebrating mass	46	95.8	2	4.2
18	Having rising heartbeat due to fears of insurgency threats in the community	48	100.0	-	-
19	Having constant edginess and agitation	48	100.0	-	-
20	Experiencing aches and pains always	48	100.0	-	-
21	Experiencing muscle tension	48	100.0	-	-

n=48

Table 2 showed the symptoms of trauma on the Catholic priests-survivor victims of herdsmen kidnapers in northern Nigerian states. From the Table, item 8 revealed that 98.5% of the Priests agreed that they were having trouble functioning effectively in their daily Parish pastoral work while 4.2% of them said no. Item 9 revealed that all (100.0%) the respondents agreed that they were suffering from severe fear, anxiety, or depression due to insecurity incidences being experiences. Item 10 revealed that all (100.0%) the respondents agreed that they were unable to form close, satisfying relationships with other diocesan Priests and Parishioners. Item 11 revealed that all (100.0%) the respondents agreed that they were experiencing terrifying memories, nightmares, or flashbacks of insurgency activities in the environment they live. Item 12 revealed that all (100.0%) the respondents agreed that they were avoiding more and more anything that reminds them of other traumatic experiences. Item 13 revealed that 93.8% of the Priests agreed that they were emotionally numb and disconnected from other diocesan Priests and Parishioners while 6.2% of them said no. Item 14 revealed that 83.3% of the Priests agreed that they were using alcohol or drugs to feel better while 16.7% of them said no. 15 revealed that 87.5% of the Priests agreed that they were having feelings of unnecessary fatigue always while 12.5% of them said no. 16 revealed that 93.8% of the Priests agreed that they were being startled easily always while 6.2% of them said no. 17 revealed that 95.8% of the Priests agreed that they were having difficulty concentrating when celebrating mass while 4.2% of them said no. Item 18 revealed that all (100.0%) the respondents agreed that they were

having rising heartbeat due to fears of insurgency threats in the community. Item 19 revealed that all (100.0%) the respondents agreed that they were having constant edginess and agitation. Item 20 revealed that all (100.0%) the respondents agreed that they were experiencing aches and pains always. Item 21 revealed that all (100.0%) the respondents agreed that they were experiencing muscle tension. Therefore, there were many symptoms of trauma on the Catholic priests-survivor victims of herdsmen kidnappers in northern Nigerian states.

Research Question 3: What are the long-term health effects of trauma on Priests-survivor victims of herdsmen kidnappers in northern states of Nigeria?

Table 3: Percentage analysis showing long-term health-effects of trauma on Priests-survivor victims of herdsmen kidnappers in northern states of Nigeria

S/N	Item	Victims' Responses			
		Yes		No	
		F	%	F	%
22	Fatigue or exhaustion	48	100.0	-	-
23	Chronic sleep	48	100.0	-	-
24	Having nausea or gastrointestinal distress	48	100.0	-	-
25	Cardiovascular problem	48	100.0	-	-
26	<u>Neurological problem</u>	48	100.0	-	-
27	Musculoskeletal problem	48	100.0	-	-
28	Respiratory problem	48	100.0	-	-
29	Dermatological problem	48	100.0	-	-
30	Urological problem	48	100.0	-	-
31	Irritability or hostility problem	48	100.0	-	-
32	Depression	48	100.0	-	-
33	Mood swings	48	100.0	-	-
34	Anxiety	48	100.0	-	-
35	Grief	48	100.0	-	-
36	Shame	48	100.0	-	-
37	Emotional detachment	48	100.0	-	-

n=48

Table 3 showed the long-term health-effects of trauma on Priests-survivor victims of herdsmen kidnappers in northern states of Nigeria. From the Table, it could be observed that all (100.0%) the victims agreed fatigue or exhaustion, chronic sleep, having nausea or gastrointestinal distress, cardiovascular problem, neurological problem, musculoskeletal problem, respiratory problem, dermatological problem, urological problem, irritability or hostility problem, depression, mood swings, anxiety, grief, shame and emotional detachment in accordance with items 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36 and 37 respectively were the long-term health-effects of trauma on Priests-survivor victims of herdsmen kidnappers in northern states of Nigeria.

Discussion of Findings

Research question one on the incidences of kidnappings of Catholic Priests in northern Nigerian states revealed that revealed that all (100.0%) the respondents agreed that two

Catholic priests serving in the Catholic Diocese of Sokoto, northern Nigeria, were abducted by unidentified gunmen on the 25th May, 2022 kidnapping incidence. Item 2 revealed that all (100.0%) the respondents agreed that two Catholic priests were kidnapped also in July, 2022 at Lere Local government Area of Kaduna state. Item 3 revealed that all (100.0%) the respondents agreed that Fr. Emmanuel Silas was kidnapped on 4th July, 2022. Item 4 revealed that all (100.0%) the respondents agreed that Fr. Abraham Kunat was kidnapped on the 9th November 2022. Item 5 revealed that all (100.0%) the respondents agreed that Fr. Anthony Dawah was kidnapped in 2022 in Kaduna. Item 6 revealed that all (100.0%) the respondents agreed that Fr. Francis Awesu was kidnapped in 2022 at St John Paul II parish Gadanaje. Item 7 revealed that all (100.0%) the respondents agreed that Fr. Joseph Akete was kidnapped in 2022 in Kaduna. Therefore, there was a very high percentage of kidnapping of Catholic Priests in northern Nigerian States. This agrees with the findings agree with the findings of

Research question two on the symptoms of trauma on the Catholic priests-survivor victims of herdsmen kidnapers in northern Nigerian states indicated that 98.5% of the Priests agreed that they were having trouble functioning effectively in their daily Parish pastoral work, all (100.0%) of the respondents agreed that they were suffering from severe fear, anxiety, or depression due to insecurity incidences being experiences, all (100.0%) of the respondents agreed that they were unable to form close, satisfying relationships with other diocesan Priests and Parishioners, all (100.0%) of the respondents agreed that they were experiencing terrifying memories, nightmares, or flashbacks of insurgency activities in the environment they live, all (100.0%) of the respondents agreed that they were avoiding more and more anything that reminds them of other traumatic experiences, 93.8% of the Priests agreed that they were emotionally numb and disconnected from other diocesan Priests and Parishioners, 83.3% of the Priests agreed that they were using alcohol or drugs to feel better, 87.5% of the Priests agreed that they were having feelings of unnecessary fatigue always, 93.8% of the Priests agreed that they were being startled easily always, 95.8% of the Priests agreed that they were having difficulty concentrating when celebrating mass, (100.0%) of the respondents agreed that they were having rising heartbeat due to fears of insurgency threats in the community, all (100.0%) of the respondents agreed that they were having constant edginess and agitation, all (100.0%) of the respondents agreed that they were experiencing aches and pains always, all (100.0%) of the respondents agreed that they were experiencing muscle tension. Therefore, there were many symptoms of trauma on the Catholic priests-survivor victims of herdsmen kidnapers in northern Nigerian states. Research question three on the long-term health effects of trauma on Priests-survivor victims of herdsmen kidnapers in northern states of Nigeria showed that all (100.0%) of the victims agreed fatigue or exhaustion, chronic sleep, having nausea or gastrointestinal distress, cardiovascular problem, neurological problem, musculoskeletal problem, respiratory problem, dermatological problem, urological problem, irritability or hostility problem, depression, mood swings, anxiety, grief, shame and emotional detachment in accordance with items 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36 and 37 respectively were the long-term health-effects of trauma on Priests-survivor victims of herdsmen kidnapers in northern states of Nigeria.

Conclusion

From the findings of this research work, the researcher concludes that there was a very high percentage of kidnapping of Catholic Priests in northern Nigerian States. Also, there were

many symptoms of trauma on the Catholic priests-survivor victims of herdsmen kidnapers in northern Nigerian states as well as long-term health-effects of trauma on Priests-survivor victims of herdsmen kidnapers in northern states of Nigeria.

Recommendations

1. Government and Church authorities in the affected Dioceses to hire more qualified counsellors to work with the Priests-survivor victims of Fulani herdsmen killer-kidnapers toward a wholistic coping and survival of the emotional development of victims.
2. The need for a framework for community counselling treatments for all Nigerians who are struggling with insecurity and trauma crisis experiences and not just for Catholic Priests survivor victims of insecurity and insurgency.
3. The government to work hard towards ending the root causes of insecurity and insurgency across the nation.
4. The State governments of the northern Nigerian states and church hierarchies in those northern States to establish community counselling centres to help victims of insecurity and insurgency trauma get adequate trauma counselling and coping measures.

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