

Self-Esteem as Predictor of Post-Traumatic Stress among Victims of Human Trafficking in South-West Nigeria

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Abstract

The advent of human trafficking has become a global plague in the twentieth century. This study examined self-esteem as a predictor of Post-Traumatic stress among a group of selected victims of human trafficking. A correlational survey design was adopted in the study. The accidental sampling technique was used to select seventy-eight (78) victims of human trafficking who were in different zones of the National Agency for Trafficked Persons (NAPTIP). Post-traumatic Stress Scale, developed by Keane et al (1984) ($\alpha = .97$) and the Inventory for Self-Esteem by Hudson, (1984) ($\alpha = .92$) was used to gather necessary information for the study. Two hypotheses were formulated and tested using an independent t-test and simple linear regression analysis. The results showed that self-esteem showed an inverse prediction on post-traumatic stress disorder ($\beta = -.28$ $p < .01$), and the scores of victims with low self-esteem ($X = 26.14$), high self-esteem ($X = 20.44$) were significantly different. The observed difference in the mean reached a significant level at $t(53) = -3.26$, $P < .05$. Based on the findings of this study, it is recommended that the National Agency for Trafficked Persons and other humanitarian organizations should establish a clinical unit within their organizations to help victims learn and become psychologically resilient should engage victims into therapeutic and educational programs and using clinical interventions to help boost self-esteem, and self-awareness of these victims to reduce the trauma associated problems associated with the heinous activities of human trafficking.

Keywords: Self-Esteem; Post-Traumatic stress; Victims of trafficking.

1. Introduction

Human trafficking is one of the major problems facing developed, developing and under-developed societies of the world. It is often regarded as one of the most heinous crimes against human race [1]. The events that accompany trafficking in persons are often harrowing, traumatic and tragic besides the most vulnerable victims are mostly women and children [2]. Human trafficking has been described as a global problem with far-reaching effects across diverse populations, human trafficking generally emanates from under-developed and developing countries to better economies especially in developed societies [3], victims of human trafficking are often trafficked sex slaves, domestic servants and drug peddlers [4]. Kenety [5], asserted that human trafficking is often regarded as one of the most gruesome violations of human rights. UNODC [6], suggested that human trafficking is a dynamic process and like several other forms of criminal activity, it is regularly changing in order to defeat efforts by law enforcement agencies to prevent it.

Victims of human trafficking suffer a plethora of dreadful conditions, deprivations and traumatic experiences that every so often lead to a host of psychological problems such as low self-esteem, post-traumatic experience, drug dependence, and emotional or mental torture [7]. Self-esteem refers to how positively someone evaluates himself or herself [8]. Santrock [9], asserted that self-esteem involves an evaluative facet of self-concept and self-esteem development is dependent on such factors as, perception of significant others, social role expectations, crises of psycho-social development and communication.

Victims of human trafficking are often vulnerable to all forms of physical and emotional abuse often leading to low self-esteem and negative evaluation of their self and a diminished sense of a life of purpose and meaning; they are often ostracized from general populations and not allowed to form positive relations with others, as well as, less autonomy and the inability to control important areas of their lives [10]. Price [10] further stated that victims of human trafficking are often unemotional, dissatisfied with life, aggressive, deprived, and have unrealistic expectations about the future, and they also show or project negative perceptions about their selves. Barrows and Finger [11], stated that mental health problem is a significant health concern in victims of human trafficking.

Barrows and Finger [11], further stated that various types of mental health problems include but not limited to post-traumatic experiences, suicidal ideation depression, anxiety and chronic fear.

According to the 5th edition of the *Diagnostic and Statistical Manual of Mental Disorders* [12], Post-Traumatic Stress Disorder (PTSD) is classified as a set of typical symptoms that develop after a person sees, is involved in, or hears of an extreme traumatic stressor. Exposure to actual or threatened death, serious injury, or sexual violence in one (or more) of the following ways; directly experiencing the traumatic events, witnessing, in person, the events as it occurred to others, learning that the traumatic events occurred to a close family member or close friend. According to Caffo and Belaise [13], PTSD has been found to be the most common psychological disorder following traumatic experiences (including human trafficking). However, not all survivors of traumatic events develop posttraumatic stress reactions [14]. However, scientific literature has shown that certain groups of victims are more susceptible [14].

2. Statement of the Problem

Nigeria has been designated as the hub of trafficking in human beings especially women and children in Afrique noire [6]. The country has turned out to be a source, route, transit and destination country for trafficked children and one of the major countries of origin for trafficked women and the only African country with such an unenviable record [6]. Eghafona [3], asserted that internationally, the most important European destination for Nigerian trafficked women is Italy and there are approximately 25,000 foreign prostitutes in Italy of which over 2,000 were trafficked from Nigeria [2].

UNODC [6], noted that 1,180 trafficked Nigerian women were deported between March, 1999 and December, 2000 mainly from Italy. Also, data from Article 18 of Inter-Ministerial Commission of United Nations, cited in Nwogu [15], showed that out of 5,577 trafficked victims taken into custody in Italy between March, 2000 and February, 2001, 52 percent (2,896) were Nigerians. Prina [16], stated that about 50,000 trafficked Nigerian girls engaging in the sex trade have been stranded in the streets of Europe and Asia, most of whom come from Nigeria's southern states of Edo, Delta and Lagos. This numbers exclude several other thousands of trafficked persons dispersed across the world [15].

International Labour Organization (ILO) in 2003 cited in Egede [17], stated that Africa has the highest estimated percentage of child laborer's in the world with 80 million or 41 percent of African children between 5 and 14 years working under unwholesome conditions, and many of these children were victims of human trafficking [17]. The ILO estimate demonstrates that 200,000 to 300,000 children are trafficked each year for forced labour and sexual exploitation in West and Central Africa.

In addition, Nwogu [15], reported that the United Nations Children's Education Fund (UNICEF) in 2003, had earlier suggested that that between 10,000 and 15,000 West African children work on cocoa plantations in various cocoa farms across sub-Saharan Africa, and that there are close to 15 million children engaged in child labour in Nigeria. Out of this 15 million, close to 40% i.e., 8 million are at the risk of being trafficked [15]. Elujoba [18], noted that there has been a significant increase in the activities of internal traffickers ranging from using orphanages as fronts for child trafficking, to exploiting the deaf and dumb, using them to beg for alms on major streets and corners within the city.

Farley, *et al.* [19], who conducted an international study among trafficked children and adults in nine countries, revealed that almost 75% of the victims met the diagnostic criteria for PTSD. Similarly, Farley and Melissa [20] who conducted a study to examine a multi-country report published in 2003 found that nearly 70% of women trafficked for prostitution that were studied met the criteria for PTSD. In a study of female survivors of human trafficking in Nepal, PTSD was found to be higher in sex workers group (29.6%) than in the non-sex workers group (7.5%) [7]. Also, in Israel, about 17% of trafficked women (the majority of which were from Moldevia, Ukraine, Russia, and Central Asian Republics of Soviet Union), who had worked as sex workers scored over the cut-off point of measurement for PTSD [7].

Leary [21], suggested that self-esteem has been implicated in various behavioural and psychological problems, the socio-meter theory of self-esteem is essentially a meter that serves to monitor, regulate and maintain interpersonal attachments and it is designed to motivate behaviours and forestall rejection. The biological theory views self-esteem in the serotonergic neurotransmitter system, while the discrepancy theory provided a conceptual basis for determining between feelings of dejection and feelings of agitation elicited by discrepancy in self beliefs [22].

Kendler, *et al.* [23] conducted a population based twin study of self-esteem and gender, they found that, individuals who scored significant high on the measure of self-esteem showed decreased tendency towards post-traumatic stress disorder. Kendler, *et al.* [23], suggested that self-esteem in individuals tend to lower post-traumatic stress levels, because individuals who have a considerable level of self-esteem tend to manage traumatic experience better.

3. Hypotheses

1. Victims of human trafficking with high self-esteem mean score will differ significantly from victims with low self-esteem on post-traumatic stress disorder.
2. Perceived self-esteem will significant predict post-traumatic stress disorder among victims of human trafficking, such that, increased score on self-esteem will lead to reduced levels of perceived post-traumatic stress.

4. Method

4.1. Research Design

This study was conducted using correlational survey design. Relevant data was collected using standardized self-report questionnaires. The dependent variable was Post-Traumatic Stress Disorder (PTSD), and the independent variables was self-esteem.

4.2. Research Setting

The population for this study were victims of human trafficking in NAPTIP rehabilitation centres from several zones in the country. These zones included; Enugu, Edo, Lagos, Ebonyi, Ogun, Benue, Calabar, Kwara, Imo, Kano, Delta, Anambra and Akwa–Ibom States. However, NAPTIP maintains only one rehabilitation centre in South East, Nigeria located in Enugu. This centre covers 5 states of Enugu, Anambra, Imo, Ebonyi and Abia States. Again, NAPTIP Benin zonal rehabilitation centre is the only centre in the South –South part of Nigeria, and it covers all the states in the zone viz, Edo, Delta, Bayelsa, Rivers, Cross Rivers and Akwa –Ibom States. More so, NAPTIP Lagos zonal rehabilitation centre is the only rehabilitation centre in the South West part of Nigeria and it covers for all the states in the zone namely, Lagos, Ogun, Osun, Ekiti, Ondo and Oyo states. The counseling and rehabilitation (C & R) Unit in each NAPTIP zonal offices is in-charge for the rehabilitation of the victims.

4.3. Participants

The study made use of 78 participants were selected through convenience sampling. The participants comprised 17 victims (all female) from Enugu zone, 12 victims (all female) from Benin zone and 26 victims (2 males and 24 females) from Lagos zone. Their age range was between 14 to 25 with a mean age of 19.89 and a standard deviation of 2.87. Twenty-five victims were from Edo state, 5 each from Ebonyi and Ogun states, 1 each from Benue, Calabar, Kwara, Imo and Kano States, 4 from Lagos State, 6 from Delta State, 3 from Anambra State and 2 from Akwa –Ibom State. 51 of the participants were Christians, while the remaining 4 were Muslims. 25 victims (45.5%) were from monogamous family type, while 30 victims (54.5%) were from polygamous family type. 44 victims (80.0%) attended school (4 primary school, 37 secondary school and 3 higher institution) while 11 victims (20.0%) did not attend. 27 victims (49.1%) were trafficked within Nigeria, while 28 victims (50.9%) were trafficked outside Nigeria. 18 victims (32.7%) were trafficked for sexual exploitation, while 37 victims (67.3%) were trafficked for non-sexual exploitation. 24 victims (43.6%) were formerly employed, while 31 victims (56.4%) were formerly unemployed and all the victims were still single.

4.4. Instruments

The questionnaire was designed in three sections (A, B, and C). Section A, captured demographic data such as age, gender, religious affiliation and family structure/type. Section B, comprised items that measured, Posttraumatic Stress Disorder. The Keane Posttraumatic Stress Disorder Scale (PKS) developed by Keane, *et al.* [24], was used to measure PTSD. The PKS is particularly valuable in distinguishing war veterans with PTSD from those of them with either psychiatric disorder but no PTSD or no disorder at all [25].

The PKS was scored such that, a score of 1 point is given for each expected response. The following are the expected scores for the items: a. 1 point for each “F” shaded/marked in items: 1,2,3,14,19,24,26,29. b. 1 point for each “T” shaded / marked in the remaining 38 items: 4-13, 15-18, 20-23, 25, 27, 28, 30-46. c. Final score is obtained by adding together the number of “F” and “T” items correctly marked to obtain the total test score for PKS. Separate norm has been reported for male and female Nigerian samples as follows: Males = 14.38, females = 12.44 [26]. In this study, the Nigerian norm for male and female samples was the basis for interpretation of the scores of the participants. Scores equal to or higher than the norms indicate that the victim manifests PTSD while scores lower than the norm indicate the absence of PTSD.

On PKS, Keane, *et al.* [24] obtained a Cronbach’s Alpha reliability coefficients of .50 for men and .87 for women and a test –retest reliability coefficients of .86 for men and .89 for women. Keane, *et al.* [24] obtained a concurrent validity coefficient of .80 by correlating the PKS version of MMPI–1 with that in MMPI -2. By correlating PKS with SCL -90 Somatization scale [27] and Psychophysiological Symptom Checklist (PSC) [25, 26] obtained concurrent validity coefficients of .97 and .94 respectively. The present study reported a Cronbach’s alpha of .92.

Index of Self-Esteem (ISE) was developed by Hudson [28]. The ISE was designed to measure global indices of self-esteem and it is scored on a 4-point Likert type scale ranging from 1 to 4 as follows, 1= Rarely or none of the time, 2 = A little of the time, 3 = Some of the time, and 4 = Most of the time. ISE Items 3, 4, 5, 6, 7, 14, 15, 18, 21, 22, 23, 25 were reversely scored, while items 1, 2, 3, 8, 9, 10, 11, 12, 13, 16, 17, 19 and 24 were scored directly. Thereafter the result of the direct scoring and the reverse scoring items will be added and 25 will be subtracted from the overall score to obtain the client’s ISE score. Separate norms have been reported for male and female Nigerian samples as follows: Males = 30.89, females = 32.04 [29]. In this study, the Nigerian norms for male and female samples were the bases for interpreting the scores of the participants. Scores lower than the norm indicated high self-esteem while scores higher than the norm indicates low self-esteem.

4.5. Procedure

A written approval was obtained from the participating NAPTIP zones and different dates were chosen by the researcher to come to the zones and administer the instruments on the participants. On the said dates, the researcher

went to the zones and with the assistance of NAPTIP staff in Counseling & Rehabilitation unit in the zone, created rapport with the victims and was able to explain to the victims how they should respond to the test and to do it honestly. The victims were given a consent form to fill out. The instruments were collected back from each victim the same day by the researcher after he or she completed his or her responses to the test.

4.6. Data Analysis

In order to test formulated hypotheses, hypothesis 1 was tested using independent t-test and hypotheses 2, was tested using simple linear regression analysis. All statistical analyses were carried out using the Statistical Package for Social Sciences (SPSS) version 20.

5. Result

5.1. Test of Relationship among the Study Variables

The collected data were analysed using Pearson Product Moment Correlation to test the extent and direction of relationship that exist among the variables of the study. The result is presented in Table 1.

Table-1. Summary Table showing the Mean, Standard Deviation and t-test on Self-Esteem

Source	Self-Esteem	Mean	Standard Deviation	N	t	df	Sig
Self-esteem On PTSD	High self-esteem	20.44	7.33	34	-3.26	53	.00
	Low self-esteem	26.14	4.04	21			

Hypothesis 1 stated that victims with high self-esteem will differ significantly with victims with low self-esteem on PTSD. Table 1 above showed that victims with low self-esteem scored mean higher than those with high self-esteem (low self-esteem (X) = 26.14, high self-esteem (X) = 20.44). The observed difference in the mean reached significant level at $t(53) = -3.26$, $P < .05$, hence hypothesis one was confirmed, therefore hypothesis 1 was accepted.

Table-4.2. Summary of Simple Linear Regression Analysis Showing the Predictive Influence of Perceived Self-Esteem on Post-Traumatic Stress

Variables	β	T	R	R ²	df	F
Perceived Self-Esteem	-.28	-1.35	.24	.06	2,78	2.18**

Note: ** $p < .01$, N= 78.

The result in Table 2, indicated that perceived self-esteem show inverse prediction on post-traumatic stress among victims of human trafficking ($\beta = -.28$ $p < .01$). This implies that perceived self-esteem negatively predicted post-traumatic stress among victims of human trafficking, suggesting that, the victims of human trafficking with increased levels of self-esteem showed decrease tendency in measures of post-traumatic stress. Therefore, hypothesis 2 was confirmed and accepted.

6. Discussion

Post-traumatic stress is synonymous with victims of human trafficking and this situation often leads to reduced or loss of self-esteem by those who experience such events. This study examined self-esteem as predictor of post-traumatic stress disorder among human trafficked victims rescued at various NAPTIP rehabilitation centres in Enugu zone, Benin zone and Lagos zone.

Hypothesis 1, which stated that victims of human trafficking with high self-esteem mean score will differ significantly from victims with low self-esteem on post-traumatic stress disorder. The outcome of this result shows that means that victims of human trafficking who have an increased sense of self-esteem will show varying degrees of reduced post-traumatic stress tendency in that, they will have more confidence in themselves and their self-evaluation will increase based on their positive evaluation of who they are before they became victims. This may not be said of victims with low self-esteem, because victims in this category are often tend to develop trauma related anxiety that reduces level of resilience in them and also decreases coping ability. Another possible explanation is that, victim experience different types of abuse, some suffer only physical abuse, while other suffer both sexual and emotional abuse. This different levels of trauma experienced plays a huge role in traumatization.

For example, Tsutsumi, *et al.* [7], in a study of female survivors of human trafficking in Nepal reported that PTSD was found to be higher in sex workers group than in the non sex workers group. The present study outcome supports the findings. Again, the idea that those trafficked for sexual exploitation are at greater risk of developing psychological disorders following their being at greater risk of violence and abuse [1] was not supported in the present study as the traumatic experiences obtained from both reasons for trafficking (sexual exploitation and non-sexual exploitation) among the participants makes no one group more vulnerable than the other for incidence of PTSD.

Hypothesis 2 stated that perceived self-esteem will significant predict post-traumatic stress disorder among victims of human trafficking, such that, increased score on self-esteem will lead to reduced levels of perceived post-traumatic stress. This hypothesis was confirmed. One explanation for this outcome could be that, victims of human trafficking who generally have an increased sense of self-esteem would tend to cope better with traumatic experiences, and these individuals will show increased levels of resilience in the face of traumatic experiences. Another plausible reason could also be that, victims who have significant levels of self-esteem will tend to show

significant coping abilities when undergoing traumatic experiences. This result is also shared by Gelder, *et al.* [30] who conducted an epidemiological study shown that not everyone exposed to the same extreme stressor develop PTSD, hence personal predisposition plays a part.

7. Recommendation

The findings of this study have great implications for NAPTIP as an agency, government policy makers, victims themselves and the academia at large. Firstly, the results of the study, would provide the humanitarian organizations leverage on where exactly to focus intervention, counselling and therapy on, in other to help victims overcome traumatic stress and related mental health problems especially PTSD.

Secondly, public institutions saddled with the human trafficking responsibility can develop curriculum geared towards re-integration and skill acquisition for victim to engage in, while in custody, so that when they are released back into the society they may become gainfully employed.

In addition, NAPTIP as an Agency should establish a Clinical Psychology Unit within the Agency who will take the responsibility of providing professional psychological services to the victims mental and psychological wellbeing if full rehabilitation and re-integration would be achieved.

8. Limitations of the Study

Similar to previous studies involving correlational survey designs, this study has ingrained limitations as well, that may arise from the method using in conducting the study. First, this study was unable to find the same number of male and female participants for the study due to the unwillingness of victims to participate in studies. This may have influence on the results thereby making generalization from this study should be done with extreme caution. Secondly, the study made use of self-report questionnaires which may be susceptible to responder bias, that is participants wanting to 'fake good' for reasons such as social desirability.

9. Suggestions for Further Studies

The increase in the advent of human trafficking in Nigeria, government parastatals, humanitarian organizations and stakeholders within Nigeria are overwhelmed with the surging population of victims of trafficking, this calls for research in this direction to shed more light into the understanding the behaviours that may predispose an individual or which type of personality in individual could likely make them become victims of trafficking. Therefore, it follows that studies in this direction should be done to address and help provide information on this area of discourse.

10. Conclusion

The study examined the incidence of PTSD among the victims of human trafficking in Nigeria and to know if self-esteem predict this incidence. The participants were selected from NAPTIP rehabilitation centres in the South East (Enugu zone), South-South (Benin zone) and South West (Lagos zone) parts of Nigeria. This study provided results that implicate policy formulation and implementation.

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