



Effect Of Rational Emotive Behaviour Therapy And Logotherapy In Reducing Trauma Among Women In Yobe State Internally Displaced Person's Camp

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ABSTRACT

This study examined the effect of Rational Emotive Behaviour Therapy (REBT) and Logotherapy (LT) in reducing trauma among women in Yobe state internally displaced person's camp. Four research objectives, two research questions and two null hypotheses guided the study. The study adopted a quasi-experimental research design with a 3/2 equation. The sample for this study was drawn from the entire population 8,381. Stratified random sampling technique was used to select all the three (3) IDPs camps in the study. 90 traumatized women were used as the sample for this study. Thus, the participants were divided into 3; 2 were in the experimental groups of (REBT and Logotherapy) and the 3rd group was the control group. For the purpose of this study, a trauma symptoms checklist, two treatment packages and traumatized internally displaced women questionnaire were used by the researcher. The data generated were analyzed using mean scores and independent sample t-test. The result of the analysis indicates that, there is a significant difference in the reduction of trauma among the internally displaced women exposed to REBT than those in the control group; and there is a significant difference in the reduction of trauma among the internally displaced women exposed to Logotherapy than those in the control group. The study concluded that the level of trauma among women exposed to REBT and Logotherapy reduced significantly than that of those in the control group. Thus, it was recommended among others that, Both social workers and counsellor are encouraged to use REBT and LT packages in managing trauma among internally displaced person's camp since they are both found to be effective.

Keywords: Rational Emotive Behaviour Therapy, Logotherapy, Trauma, Women in Internally Displaced Person's Camp.

INTRODUCTION

The major concern of academia, government and policy makers prior to the September, 11, 2001 terrorist bomb attack on United States during was on issues such as drug abuse, religious and ethnic crises, civic war etc. However, it is evident that there is increase in number of terrorist groups across the globe has become one of the major challenge to global peace and security. Insecurity is a threat to the economic, political and social security of the world and a major factor associated with under development which

destroys both local and foreign investment. As such insurgency diminishes quality of life; destroy human and social capital, damages relationship between citizen and the state, undermine democracy, rule of law and the ability of the World to promote development (Bintube, 2015). United Nation Commission for Human Refugees (2015), posited that hundreds of thousands of people are displaced due to insurgency every year globally.

In Nigeria, the various acts of violence experienced after independence took a new dimension in 2009 with the emergence of terrorist activities in the North East part of the country. This act of domestic terrorism is attributed to an Islamic sect popularly called “Boko Haram” which is translated to mean “Western education is forbidden”. The Boko Haram once referred to as Yusuffiya named after founding leader, Mohammed Yusuf, started in the Borno-Yobe axis in the 1990s but gained notoriety in 2001 (Mohammed, 2020). Boko Haram is a home grown insurgency that rose from among the sect of Izalatulbidi’a waikamatul sunna founded in 1992. Later Mohammed Yusuf, the founding leader of Boko Haram, came up with a synthesized and different interpretation entangle with Islam as a social fact of deception to stage Jihad which was vehemently rejected by the Izalatulbidi’a waikamatul sunna (Bintube, 2015).

Even though displacement was not a new concern in Nigeria’s socio- political parlance, Kyari cited in Bintube (2015) recalled that the Maitatsine sect-triggered violence in 1984 occurred mainly in the Northern part of the country largely dominated by Muslims Maitatsine like the Yusuffiyya Boko Haram also, entangled with religion as social fact of deception to stage Jihad against humanity. Thus, displacing hundreds of thousands of women. The violence which consumed most parts of Borno, Yobe and Kano States led to anomaly condition and massive destruction of many lives and critical public properties under the cover of religion. However, when Boko Haram unlike Maitatsine began their campaign of destruction in Northeast Nigeria, the numbers of Internally Displaced Persons (IDPs) rose significantly. Most importantly, since 2014 the issues of IDPs have had a high profile in local as well as international media. According to Internally Displaced Management Commission (IDMC) 2016, as of October 2015, the Boko Haram insurgency had led to displacement of over 2 million people in total. The distribution is as follows:

1. 1.6 million IDPs in Maiduguri, Borno State
2. About 144,000 IDPs in Yobe State
3. About 135,000 IDPs in Adamawa State
4. 44,800 refugees in Cameroon
5. 15,000 Refugees in Chad
6. Over 105,000 Refugees in Niger

The UN Security Council (2021) has expressed “particular concern at the grave problems faced by many displaced women and children, including violence and abuses, sexual and labour exploitation in persons, forceful recruitment and abduction”.

Efforts by Federal and State governments to address IDP’s needs are inconsistent and access to support from international agencies and Nigeria civil society is limited. IDP’s who live in government and private camps in Yobe state receive some assistance, but often not enough to meet their food and other basic needs. They tend to live in cramped and unhygienic conditions. The current emphasis on short-term and emergency response prevents understanding of how vulnerabilities increase with each cycle of displacement, how to address the psychosocial needs of displaced women and how to facilitate IDPs’ achievement of durable solutions to their plights (IDMC, 2014). Thus, lead to traumatic events that can generate into severe psychological reactions and possibly manifest at any time.

Trauma is a distressing event in which a person feels severely threatened emotionally, psychologically or physically. Most people experience a traumatic event at some point in their lives, such as car accident, abuse or neglect, sudden death of a loved one, a violent criminal act and exposure to the violence of war or a natural disaster such as terrorism or flooding (Musa, 2019). Many people recover from trauma with time and through the support of family and friends, bouncing back with great resilience. But for others, the effects of trauma are longer, causing a person to live with deep emotional pain, fear, confusion or

post-traumatic stress for after the event has passed. It may be that trauma can result in growth, in as much as trauma can push someone to develop through the way he or she appraises the situation and the decisions he or she makes when traumatized.

Generally, findings have shown that most of the internally displaced persons are exposed to traumatic occurrence which may also lead to Post-Traumatic Stress Disorder (PTSD). Counselling intervention can help individual with such problem as well as those with post-traumatic disorder to make sense of their experience and feelings, develop plans to stay safe, learn healthy coping skills (Yahaya & Mustapha, 2015). One of these counselling intervention is the Rational Emotive Behaviour Therapy (REBT) is an improvement on Rational Emotive Therapy (RET) of Albert Ellis. According to Ellis (1956), the improvement of name and change of name was done to emphasis that, it has always been cognitive, emotive, and behavioural. Rational Emotive Behaviour Therapy aims at helping human beings achieve the basic goals or values. It is a method of solving emotional problems and also a technique were by the clients are helped to maximize their self-actualizing tendencies and encouraging them to assume responsibilities for their own lives to become sensibly self-directing (Olasebikan, 2017).

The second counselling intervention in this study is Logotherapy by Viktor Frankl who developed his meaning-centered psychotherapy prior to the World War II, but found this convictions later “tested” in the harshest of circumstances as an in-mate for three years in four different Nazi-Concentration camps (Frankl in Pur, 2017). Logotherapy is considered to be an adjunctive therapy, enhancing rather than supplanting other treatment approaches (Southwick, GilmAartin, Mcdonough & Morrissey cited in Mohammed, 2020). Unlike traditional psychotherapies, which focus on psychopathology and psychological symptoms. Logotherapy specifically addresses a client’s strengths and his/her personal search for meaning and purpose of life. These study therefore, investigated the effect of Rational Emotive Behaviour Therapy and Logotherapy in reducing trauma among women in Yobe state internally displaced person’s camp.

Statement of the Problem

In any conflict environment losses, pains, trauma, anxiety and depression are common with the victims and the loved ones who are also part of them. Insurgency has become a threat to global peace and security in the 21st century. It constitutes the highest contributor to humanitarian crises in the form of rise in human casualties, internally displaced persons and the spread of various diseases. These have left many persons traumatized, each time families are displaced, women are often at the receiving end because of their responsibilities of taking care of the children, ensuring that the house wares are in good condition and coordinating re-settlement. Family disintegration, which is a common feature of internal displacement, poses a serious psycho-social challenge to women in Yobe state IDP’s camps.

Notably, sexual and gender-based violence is an unfortunate reality for many women. Often without the protection of family and communities they had before displacement, internally displaced women are vulnerable to unsafe sexual practices, unwanted pregnancies, unsafe abortions and increased exposure to Sexually Transmitted Infection (STIs). The researchers observed that Poverty and lack of other income generating activities may lead to severe trauma among women in Yobe state IDP’s camps. Women in Yobe state IDP’s camps experience trauma by struggling with upsetting emotions, frightening memories, feeling disconnected and unable to trust other people.

Women are faced with unhealthy occurrences such as forced marriage and sexual violence which can take them a while to get over the pain and feel safe again. Also, Women who have lost their husbands to terrorism also face additional challenges as responsibilities as heads of households. Thus, the main thrust of the present study is to investigate effect of Rational Emotive Behaviour Therapy and Logotherapy in reducing trauma among women in Yobe state internally displaced person’s camp.

Research Objectives

The objectives of this research work were to:

1. Determine the level of trauma among women in Yobe state internally displaced person’s camp who are exposed to REBT.

2. Determine the level of trauma among women in Yobe state internally displaced person's camp who are exposed to Logotherapy.

Null Hypotheses

Two null hypotheses were formulated and tested at 0.05 level of significance:

1. There is no significant difference in level of trauma among women in Yobe state internally displaced person's camp exposed to REBT and those in control group.

There is no significant difference in level of trauma among women in Yobe state internally displaced person's camp exposed to Logotherapy and those in control group.

METHODOLOGY

This study employed a quasi-experimental design involving factorial pre-test, post-test, control group experimental design (3 x 2). The design is represented in table 1 below

Table 1: Factorial Design of the Study

Pre-Test	Intervention	Post-Test	Therapies
O ₁	X ₁	O ₄	E ₁
O ₂	X ₂	O ₅	E ₂
O ₃	-	O ₆	Control

Where O₁, O₂ & O₃ represented the pre-test observations for Experimental groups 1, 2 and the control group. O₄, O₅ & O₆ represented the post-test observations for Experimental groups 1, 2 and the control group respectively. X₁ represents treatment of Rational Emotive Behaviour Therapy (REBT group) and X₂ represent treatment of Logotherapy group.

Population of the Study

The population of the study consist of 8,381IDW of reproductive age (ages of 15-49) who are in Kukareta, Kasaisa and Abbari YBC IDPs camps of Yobe state. This is presented in table 2.

Population of the Study

S/N	Location	Population
1.	Kukareta	3,875
2.	Kasaisa	2,581
3.	Abbari YBC	1,925
	Total	8,381

Source: Camp Registers

Sample and Sampling Technique

The sample for this study was drawn from the entire population of 8,381. Stratified random sampling technique was used to select all the three (3) IDPs camps in the study. The reason for using stratified random sampling is that each of the three (3) IDPs camps were located in different area. Thus, the representative sample was selected using the Briere and Runtz (1989) Trauma Symptoms Checklist-40 to determine traumatized women in the three IDPs camp. The researcher decided to distribute 600 trauma symptoms checklist i.e., 200 copies each at the three IDPs camps. However, 180 out of the 600 checklist distributed was retrieved from the IDPs camps, of which 90 of the checklist indicates the presences of trauma. All the 90 traumatized women were used as the sample for this study. Thus, the participants were divided into 3; 2 were in the experimental groups of (REBT and Logotherapy) and the 3rd group was the control group.

Instrumentations

For the purpose of this paper, two instrument were adapted and two packages were adopted for use. These are as follows:

1. Adapted version of Briere and Runtz's (1989) Trauma Symptoms Checklist (TSC-40) was used to determine the number of Traumatized Women in Yobe IDPs Camp.

2. Adopted version of Pur (2017) REBT Package: was used as treatment package on women with trauma (with Reliability index of 0.72).
3. Adopted version of Pur (2017) Logotherapy Package: was used as treatment package on women with trauma (with Reliability index of 0.78).
4. Adopted version of Pur (2017) Traumatized Internally Displaced Women Questionnaire (TIDWQ) was used to measure trauma on IDPs women (with Reliability index of 0.82).

Validity of Adapted version of Briere and Runtz's (1989) Trauma Symptoms Checklist-40

Briere and Runtz (1989) validated the instrument through a panel of experts. The experts were selected based on their individual expertise in different field of psychiatric, behavioural science and psychology. The judges found out that the items are useful, adequate and suitable. Thus, the revised instrument was validated by experts in Department of Psychology/Guidance and counselling, School of Education, Federal College of Education (Technical) Potiskum, Department of Education, Yobe state University and Faculty of Education University of Maiduguri.

The respondent were asked to rate how often they have experienced trauma symptoms in the last few month/years using a 4-point frequency rating scale ranging from 0 to 3. The total score range from 0 to 120. Respondents with higher scores ranging between 71-120 were considered in this study as indicating more traumatic symptoms.

Reliability of the Instrument

A pilot study was conducted in order to obtain the reliability of the adapted version of Briere and Runtz's (1989) Trauma Symptoms Checklist (TSC-40) instruments, the researcher administered a test re-test on participants at Bakassi IDPs camp in Borno state who are not part of the study and the two set of scores were subjected to Cronbach's alpha statistics to determine its reliability index and a reliability alpha of 0.89 was obtained. This was considered high enough for the study.

Method of Data Collection

The administration of the instrument was carried out on traumatized women who constituted the sample for the study in their respective IDPs camps. Before the administration of the instruments, permission to conduct the study in the IDPs camps was sought for from the necessary authorities with the help of institutional letter head to determine a convenient day and time for the administration of the instruments and necessary support. The researcher also employed three research assistants who assisted with the administration and retrieval of the questionnaire in each of the three IDPs camps.

Procedure for the Treatment

The procedure for treatment for this study was carried out in three phases as follows:

- a. Pre-treatment Phase;
- b. Treatment Phase; and
- c. Post-treatment phase.

Method of Data Analysis

The data generated were analyzed using mean scores for the research question one and two while independent sample t-test was used to test $H_{01} - H_{02}$ at the probability level of 0.05 level of significance.

DATA PRESENTATION

The presentations below revealed information about the respondents in the Internally Displaced Persons Camp in Yobe state. These were presented in table 1-3.

Table 1: Rank Order of the Level of Trauma Experience by Women in IDP Camps in Yobe before and after treatment

S/N	Statement of experience	Means Score			
		Pre	Level	Post	Level
1	Do you easily feel shocked?	2.67	high	1.66	high
2	Do you feel frightened easily?	2.22	high	1.56	high
3	Do you normally have fearful thoughts?	2.25	high	1.45	low
4	Do you persistently get confused?	2.18	high	1.35	low
5	Do you have trouble falling asleep?	2.06	high	1.34	low
6	Do you normally feel tensed?	1.99	high	1.32	low
7	Do you usually have some bad dreams?	2.07	high	1.42	low
8	Do you have any difficulty in remembering things?	1.53	high	1.33	low
9	Do you feel trouble or bothered?	2.58	high	1.50	low
10	Do you feel ashamed of yourself?	1.66	high	1.23	low
11	Do you keep close friends?	2.21	high	1.30	low

From the Table 1, it could be seen that “Do you easily feel shocked” had the highest mean of 2.67 while “Do you have any difficulty in remembering things” had the lowest mean of 1.53 in the pre-test. “Do you easily feel shocked” has the highest mean 1.66 in the post-test with “Do you feel ashamed of yourself” having 1.23 as the lowest mean.

H0₁: There is no significant difference in the reduction of trauma among internally displaced women exposed to REBT and those in the Control group.

This hypothesis was subjected to t-test analysis and result was presented in table 2.

Table 2: t-test difference between Women Exposed to REBT and Control Group

Variables	N	\bar{X}	SD	df	t-Cal	t-Value	Decision
REBT	30	16.77	1.315	58	3.189	.000	Significant
Control Group	30	34.15	.732				

From the result of Table 2, difference in the reduction of trauma among the internally displaced women exposed to REBT and those in Control group was positively significant, $t(58) = 3.189, p = .000$. This indicates that there is significant difference in the reduction of trauma because the *t*-value is less than the .05 level of significance. Therefore, H₀₁ which states that there is no significant difference in the reduction of trauma among the internally displaced women Yobe IDPs camp exposed to REBT and those in Control group was rejected.

H0₂: There is no significant difference in the reduction of trauma among internally displaced women who are exposed to Logotherapy and those in control group.

This hypothesis was subjected to t-test analysis and result was presented in table 3.

Table 3: t-test difference between Women Exposed to Logotherapy and Control Group

Variables	N	\bar{X}	df	SD	t-Cal	t-Value	Decision
Logotherapy	30	16.71	58	1.212	2.113	.000	Significant
Control Group	30	34.15		.732			

From the result of Table 3, difference in the reduction of trauma among the internally displaced women exposed to Logotherapy and those in the Control group was positively significant, $t(58) = 2.113$, $p = .000$. This indicates significant difference in the reduction of trauma because the t-value is less than the .05 level of significance. Therefore, H02 which states that there is no significant difference in the reduction of trauma among the internally displaced women in Yobe IDPs camps exposed to Logotherapy and those in Control group was rejected.

Summary of Findings

The following are the major findings of the study:

1. There is a significant difference in the reduction of trauma among the internally displaced women exposed to REBT than those in the control group.
2. There is a significant difference in the reduction of trauma among the internally displaced women exposed to Logotherapy than those in the control group.

DISCUSSION OF FINDINGS

In hypothesis one, the study revealed that there is a positive significant difference in the reduction of trauma among the internally displaced women exposed to REBT and those in the Control group. This finding confirmed earlier study of Tulu (2014) who carried out a study on effectiveness of Rational Emotive Behaviour Group Counselling for Post-traumatic Stress Disorder in Orphan children at Kechene Children Home (KCH) that is found in Gullale sub-city of Addis Ababa City Administration in Ethiopia. The population for the study was all 290 orphan children who were assumed to have PTSD. The screening test was scored and participants who met the inclusion criteria were selected. A nonequivalent control group pre and post-tests of quasi-experimental research design was employed. Using the inclusion criteria, 60 participants aged 12 and 17years old were purposefully selected and randomly assigned to the control and the treatment groups with 30participants in each group. The Child Post-traumatic Stress Symptoms Scale (CPSSS) was employed to measure the dependent variable before and after intervention. Participation in the treatment group received 12sessions of rational emotive behaviour group counseling for 4 successive weeks, 3 sessions per week; each session lasted for 1hour. The study employed descriptive statistics and t-test. This result implies that, rational emotive behaviour group counseling is effective for the treatment of post-traumatic stress disorder in orphan children.

Again, Simson and Dryden (2011) carried out a study on comparison between REBT and Visual/kinesthetic Dissociation in the Treatment of Panic Disorder. The study was a two-way between-groups pre-test/post-test experimental design with baseline and follow-up measures. An innovative four session treatment protocol was developed for each treatment method. Eighteen participants in North-East Surrey, England, who responded to media advertisements for rational emotive behaviour treatment for panic disorder and who met Diagnostic and Statistical Manual of Mental Disorders criteria for panic disorder with or without agoraphobia, were randomly assigned to either REBT or VKD. Pre-test/Post-test changes in panic were measured using the ACQ, PASQ and HADS scales and a global panic rating measure. The statistical tool used in the study was ANOVA. The univariate tests found highly significant results for each dependent variable across both treatment conditions: these results were; depression, $F(3.48) = 22.38$, anxiety, $F(3.48) = 36.52$, ACQ, $F(3.48) = 45.19$, PASQ, $F(3.48) = 162.02$.

The result of hypothesis two also showed a positive significant difference in the reduction of trauma among internally displaced women who are exposed to Logotherapy and those in the control group. Julom

and Guzman (2013) confirmed this in their research on effectiveness of Logotherapy Programme in alleviating the Sense of Meaninglessness of Paralyzed patients: the researchers developed a Logotherapy counselling for the 16 randomly selected paralyzed inpatients of the Philippine Orthopedic Centre, Quezon City Philippine. The Purpose of Life (PIL) and the Life Regard Index (LRI) tests were the two instruments utilized to determine the level of existential vacuum or meaning in life of the 32 randomly selected participants before and after the intervention. The participants in the study were grouped according to the following stages: adolescence (16-20), early adulthood (21-40) and middle adulthood (41-65). This was done to facilitate experience of meaning of existential vacuum throughout life span.

The study reveals that in the experimental group the oldest group of participants (41-65) constitutes the greatest percentage (43.75). Whereas in the control group, it was the youngest (16-20), that constituted the highest percentage (37.50). The study employed descriptive and t-test statistical tools. At the end of all the counseling sessions experimental group mean score (53.25) and the control group's mean score (58.69), although have significant difference statistically are both within the level of existential vacuum. Hence the cited significant difference cannot be considered as an indication of the dissimilarity of the groups' sense of meaninglessness levels in LRI pre-tests. Contrary to the pre-test results, the post-tests outcomes both in PIL, $t(30) = 23.42$, $p < .05$ and LRI, $t(30) = 21.56$, $p < .05$, mark a significant difference between the experimental and control groups' mean scores of the sense of meaninglessness.

These results clearly communicate that logotherapy programme has indeed a remarkable effect on the level of the sense of meaninglessness in the participants of the experimental group, the effectiveness of the logotherapy as it shows that in PIL (93.75%) of the experimental group's participants are able to gain the presence of definite meaning and purpose of life and (87.5%) in LRI improves to the said level, while (100%) of the participants in the control group still remain in the level of the lack of clear meaning and purpose in both PIL and LRI tests where all of the participants were found during the pre-treatment period of this experimental study. The experimental group was able to move out of the meaninglessness level after the completion of the logotherapy program while the members of the control group remained in the same meaninglessness level. This result them to face the present reality of their lives. At the end of the first session the selected participants have realized that their past experiences were somehow needed for their survival in their present situation.

CONCLUSION

Conclusion drawn from this study indicated that, trauma of women in IDP's camp can be effectively managed by the use of REBT package and that, logotherapy as a treatment package also is an effective package for managing trauma among women in IDP's camp in Yobe state. Also, REBT was more effective than Logotherapy in reducing trauma among internally displaced women. And lastly, the level of trauma among women exposed to REBT and Logotherapy reduced significantly than that of those in the control group.

RECOMMENDATIONS

In view of the above findings, it is recommended that: -

1. Both social workers and counsellors are encouraged to use REBT and LT packages in managing trauma among internally displaced person's camp since they are both found to be effective.
2. Social workers and counsellors should utilize REBT package in managing trauma among women and other patients who are suffering from one form of trauma or the other.
3. Social workers and counsellors should utilize Logotherapy package also in managing trauma among women and other patients who are suffering from one form of trauma or the other.

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