International Journal of Innovative Social Sciences & Humanities Research 8(2):21-27, April-June, 2020

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Social Inclusion and the Effect of Counselling among Internally Displaced Persons (IDPs) in Gombe Metropolis

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ABSTRACT
Displacement is a contemporary social problem confronting Nigeria, particularly in the North East. It leads to social exclusion of the displaced persons. The study therefore sought to investigate the effect counselling has on social inclusion of Internally Displaced Person's (IDPs) in Gombe metropolis. Three hypotheses were tested at 0.05 level of significance while experimental research design was employed for the study. There were 22 IDP's selected for the experiment through purposive and convenient sampling techniques. Data for the study were collected using the rating scale observational tool titled: Social Inclusion Rating Scale (SIRS). Cronbach's Alpha statistic was used to test the reliability of the instrument with a coefficient of 0.81. Data for the study was analyzed using t-test of independent samples at 0.05 level of significance. The study found that counseling influenced access to social institutions and participation but did not influence education and training as well as social inclusion among IDPs in Gombe metropolis. It was concluded that counselling is very essential for social inclusion of IDPs. It was recommended that professional counsellors, administrators of IDP Camps, government and non-governmental organizations should adopt counselling as a means of social inclusion of IDPs in Gombe metropolis.
Keywords: Social Inclusion, Effects, Counselling, Internally Displaced Persons, Gombe

INTRODUCTION

The act of displacing people from their ancestry homes and communities is a contemporary social and global phenomenon. Displacement of individuals from their natural habitation can be painful leading to traumatic and divesting experiences. The reason is simply because wherever they find themselves, becomes entirely new to them. It is like beginning a new life entirely.

Displacement can be either natural disaster (flood, drought earthquake) or man – made disaster (communal clashes, religious crises, armed conflicts etc). Unfortunately in Nigeria, some of the causes of displacement of people are terrorism, banditry, communal clashes, herdsmen attack, religious problem etc. These disasters

though man made leads to what we have as Internally Displaced Persons (IDPs). The United Nation High Commission for Refugees (UNHCR) (2019) sees IDPs as people who are forced to flee… but they either cannot or do not wish to cross an international border. In most cases, these IDPs are been cared for by the government and non-governmental organizations in their various camps.

The Internal Displacement Monitoring Centre (IDMC, 2016) projected about 2,216 IDPs in Nigeria at 31st December, 2018. The report of 26 Displacement Tracking Matrix (DTM) evaluations by International Organization for Migration (IOM) aims to improve the understanding of the area of the internal displacement in the most states being affected in the North East of Nigeria. The report covers the period of 20th October, 2018 to 20th January, 2019 and reflect occurrence from six states (Adamawa, Bauchi, Borno, Taraba and Yola) that were most affected displacement. The result showed that 1,948,349 persons were reported as being displaced in the affected areas (DTM, 2019). In Gombe State, Mallam Mohammed Garba, the Rescue and Rehabilitation Officer of the State Emergency Management Agency (SEMA) disclosed in an interview with the News Agency of Nigeria (NAN) in Gombe that the State has a total of 31,909 registered IDPs, who have been integrated into various host communities as at 20th November, 2018.

During conflicts, IDPs are forced to leave their homes and communities for safety. In the mist of panic, chaos and confusion, they find themselves in strange or unknown places. This could make their participation in activities of the strange or new environment extremely difficult. The associated effects of the displacement ranges from loss of husband/wife, children, relatives and friends, physical and psychological injuries, various forms of sexual abuses hunger, economic loss, social and health loses and violation of human rights and social disarticulation. These experiences undoubtedly put the IDPs emotionally/psychologically off-balance, thus, affecting their social inclusion.

Social inclusion is the process whereby effects are been made for people to participate or have equal opportunities in given society. This means that everyone regardless of background participate equally in other to achieve a full potential in life. In other words, it means strong participation of people in a given activity, without social inclusion, people may not have a sense of presence in their group or community activities. In every society, contain individuals or groups confront blockages that stops them from participating in the nation's political, economic and social life. IDPs fall within these categories. They are often excluded from the strange society they have found themselves. Social inclusion is highly important, without which there is the likely hood of people been lonely, isolated, withdrawn to themselves and have poor self-esteem. Stewarts (2001) study found that traumatic event (such as displacement) is and constantly experienced in various ways that it is recurrent and distressing the recollection of event, flash backs, intense psychological distress, insomnia, outburst of anger, difficulty in concentrating, lack of participation and cooperation and anxiety, this means that displaced persons experience acute emotional and psychological challenges because of traumatic events that displaces them. Stalwart (2001) went further to suggest few intervention approaches like appropriate social assistance and emotional first aid, one of such is counselling. Stalwart added that IDPs experience an emotional and psychological challenge which affects their cognitive reasoning, feelings, mood and inability to cope which also adds to their stress.

Theoretical Framework

This work was anchored on Behaviour Modification Theory of John B. Watson of 1913. With his behaviourism, Watson placed emphasis on external behaviour of individuals and the way they react on a given situation rather than on their mental state. He is of the opinion that, the way and manner people analysis others behaviours and reactions were the only objective method of getting insight into human actions.

Human behaviour is learned, thus all behaviours can be unlearned and new behaviours learned in their place. Behaviourism is primarily concerned with measurable and observable part of human behaviour. Therefore, when behaviours become unacceptable unnecessarily, they therefore can be unlearned. Behaviourism assumes that the only things that are real (or at least worth studying) are the things we can see and observe (Lannap, 2012). We cannot see the mind or the unconscious, but we can see how people act, react and behave (Kolo&Mallum, 2015). What people do, not what they think or feel is the object of the study.A behaviourally oriented counsellor has an interest in the response pattern itself and the particular situations in which it occurs? He (that is the counsellor) utilizes techniques that enable the determination of the functional relationship between maladaptive behaviour and the environmental stimuli that are affecting it. He then attempts to collect

information that will enable him/her to determine:What behaviour requires modification, and what environmental factors are maintaining those behaviours? The reasons why this theory was used is because it placed emphasis on external behaviour of human beings and the way they react on a given situation. Behaviour is one among other components of attitude. So also, emphasis was placed on behaviours that were expressed by IDPs in Gombe metropolis. The theory was also adopted as it placed greater emphasis on "here and now" or current factors that are maintaining behaviours. This study also placed emphasis on the current observable behaviours of IDPs in Gombe metropolis.

Purpose of the Study

The goal of the study was to investigate social inclusion and the effect of counselling among internally displaced persons (IDPs) in Gombe metropolis. The study sought to achieve the following objectives:

1. to find out if counselling influenced access to education and training among the control and experimental groups inIDPs in Gombe metropolis
2. to determine the influence of counselling on access to social institutions and participation among the control and experimental groups in IDPs in Gombe metropolis
3. to ascertain the effect counselling has on social inclusion among the control and experimental groups in Gombe metropolis

Hypothesis

The following hypotheses were tested at .05 level of significance:

1. There is no mean score significant difference on the extent to which counselling influenced access to education and training among IDPs in the control and experimental groups in Gombe metropolis
2. There is no mean score significant difference on the extent to which counselling influenced access to social institutions and participation among IDPs in the control and experimental groups in Gombe metropolis
3. There is no mean score significant difference on the effect counselling has on social inclusion among IDPs in the control and experimental groups in Gombe metropolis

METHODS

Participants

Mobile Police Barrack IDP camp in Gombe metropolis consist of 44 IDPs as at 31st May, 2019 (Field Source: 2019). The population for this study was therefore 44. The fraction selected for the study as sample was half. The sample of the study therefore was 22 (44÷2=22). The 22 participants were selected through purposive and convenient sampling techniques.

Research Design

Experimental research design was employed for the study. Experimental design was used in order to find out the effect of one variable (counselling)on another variable (social inclusion). Here, the independent variable (counselling) was manipulated in order to find out its effect on the dependent variable (social inclusion).

Instrument

Numerical rating scale (an observational tool) was used to collect data for this study. It was titled "Social Inclusion Rating Scale (SIRS). Rating scale is used in order to indicate the level to which each behavioural characteristic is present, and to provide a common reference for comparing individuals on the same characteristics (Awotunde & Ugodulunwa, 2004). The instrument was designed by the researcher. It was evaluated by two experts, one each from guidance and counselling, and research, measurement and evaluation from Federal University Kashere, Gombe State.Cronbach alpha method of reliability was established for the instrument and it yielded a coefficient of 0.81, which means that the instrument was reliable for collecting data for the study.

Procedure

Letter of introduction was presented to the Director of the IDPs camp by the researcher to seek for his consent and approval to interact with the IDPs. Appointment was booked with the authorities of the camp and the 22 IDPs that were part of the study before the observation was done. The participants were given numbers for easy identification. After the six weeks treatment/counselling on social inclusion for participants in the experimental group, the researcher used the rating scale to score their behaviours or level of social inclusion.

The observation and rating were done without the knowledge of the participants so as avoid faking of behaviour by the participants.

Method of Data Analysis

The t-test of independent samples was used to test the hypotheses at 0.05 level of significance using the Statistical Package of Social Sciences (SPSS), version 23.

RESULTS

Hypothesis Testing

Hypothesis 1: There is no mean score significant difference on the extent to which counselling influenced access to education and training among IDPs in the control and experimental groups in Gombe metropolis

Table 1: Summary of the t-test of independence on the significant difference in the extent to which counselling influenced access to education and training among IDPs in the control and experimental groups in Gombe metropolis

T-Test

Group Statistics

	Group Membership	N	Mean	Std. Deviation	Std. Error Mean
Data	Control Group	11	29.3636	4.34218	1.30922
	Experimental Group	11	31.3636	6.31305	1.90345

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
									95% Confidence Interval of the Difference	
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
Data	Equal variances assumed	2.211	.153	-.866	20	.397	-2.00000	2.31024	-6.81907	2.81907
	Equal variances not assumed			-.866	17.731	.398	-2.00000	2.31024	-6.85890	2.85890

In table 1 above, the mean values of 29.3636 and 31.3636 implied that the experimental group differed from the control group with an average mean score of 2.000 on the extent to which counselling influenced access to education and training among the IDPs in Gombe metropolis. Similarly, since the p-value of 0.397 ›0.05 the null hypothesis was not rejected and this implied that there was no mean score significant difference on the extent to which counselling influenced access to education and training among IDPs in the control and experimental groups in Gombe metropolis.

Hypothesis 2:There is no mean score significant difference on the extent to which counselling influenced access to social institutions and participation among IDPs in the control and experimental groups in Gombe metropolis

Table 2: Summary of t-test of independence on the significant difference in the extent to which counselling influenced access to social institutions and participation among IDPs in the control and experimental groups in Gombe metropolis

T-Test

Group Statistics

	Group Membership	N	Mean	Std. Deviation	Std. Error Mean
Data	Control Group	11	25.7273	4.56269	1.37570
	Experimental Group	11	31.3636	6.31305	1.90345

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
									95% Confidence Interval of the Difference	
		F	Sig.	T	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
Data	Equal variances assumed	2.181	.155	-2.400	20	.026	-5.63636	2.34855	-10.53536	-.73737
	Equal variances not assumed			-2.400	18.208	.027	-5.63636	2.34855	-10.56646	-.70627

The values of the mean scores of 25.7273 and 31.3636 from the control and experimental groups in table 2 implied that there was a mean difference of 5.6363 between both groups indicating the extent to which the experimental group differs from the control group on the influence of counselling on access to social institutions and participation among IDPs in Gombe metropolis. However, since the p-value of 0.026 was ‹ 0.05, the null hypothesis was rejected implying that counselling influenced access to social institutions and participation among IDPs in the control and experimental groups in Gombe metropolis.

Hypothesis 3: There is no mean score significant difference on the effect counselling has on social inclusion among IDPs in the control and experimental groups in Gombe metropolis

Table 3: Summary of t-test of independence on the significant difference in the effect of counselling on social inclusion among IDPs in the control and experimental groups in Gombe metropolis

T-Test

Group Statistics

	Group Membership	N	Mean	Std. Deviation	Std. Error Mean
Data	Control Group	11	24.5455	8.48957	2.55970
	Experimental Group	11	30.0000	6.58787	1.98632

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
									95% Confidence Interval of the Difference	
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
Data	Equal variances assumed	1.702	.207	-1.684	20	.108	-5.45455	3.23999	-12.21304	1.30395
	Equal variances not assumed			-1.684	18.838	.109	-5.45455	3.23999	-12.23986	1.33076

Table 3 showed that the mean scores of 24.5455 from the control group and 30.0000from the experimental group showed a mean difference of 5.4545 in the responses of the control group and experimental group on the

effect of counselling on social inclusion among IDPs in in Gombe metropolis. Similarly, the p-value of 0.108 › 0.05 was why the null hypotheses was not rejected indicating that there was no difference in the effect of counselling on social inclusion among IDPs in Gombe metropolis.

DISCUSSION OF FINDINGS

It was revealed that there was no mean score significant difference on the extent to which counselling influenced access to education and training among IDPs in the control and experimental groups in Gombe metropolis. This implies that counselling does not significantly determine access to education and training among IDPs in Gombe metropolis. This finding was related to the study carried out by Nemine and Zalakro (2019) which showed that IDPs access education and training because it is a basic need. This may be the reason why Akuto (2017) revealed that educational institutions need to intervene in the provision of the right quality of education. This implies that some of these IDPs with or without counselling see education and training as a necessity and as such are quick to adjust to acquire this social service as part of their social inclusion and adjustment strategy. However, counsellors can help by ensuring that the education and training acquired are used to promote other aspects of their social life which will further boost their social inclusion chances.

In table 2 the null hypothesis was rejected implying that counselling influenced access to social institutions and participation among IDPs in the control and experimental groups in Gombe metropolis. This implies that the extent to which IDPs engage in social participation activities and also engage social institutions in their various locations are determined by the quality of counselling services provided. However, the studies by Lazarus, Baptiste and Seedat (2009) suggests that the communal life that existed in some of these IDPs was the reason why counselling was able to contribute to social participation and engagement of social institutions. Furthermore, studies by Lusli, Peters, Brakel, Zweekhorst, Iancu, Bunders and Irwanto (2016) suggest that counselling helps members of the public especially in IDPs to understand their rights and obligations better. This understanding gained from counselling may be the reason why IDPs who were counselled were able to benefit more in terms of social participation and engagement of social institutions. This understanding of individual rights and obligations as a result of counselling services provided for the IDPs goes a long way to improve the social life of these respondents and this is paramount for the individual and communal life of IDPs in Gombe metropolis.

Table 3 showed that null hypotheses was not rejected indicating that there was no difference in the effect of counselling on social inclusion among IDPs in Gombe metropolis. Similar studies by Sakız, Woods, Sart, Erşahin, Aftab, Koç and Sarıçam (2015) pointed out that it is only an all-inclusive counselling that will lead to social inclusion among disabled people in the study area. This outcome revealed that an all-round counselling is needed for achieving social inclusion among IDPs in Gombe metropolis. Since there are different counselling services provided in some of the IDP camps, there is need for counsellors to access the social inclusion needs of IDPs so as to be able to provide specifically important services to IDPs in Gombe metropolis. This will help to ensure an all-round social inclusion through the provision of a robust and comprehensive counselling services in these camps. Similarly, IDPs should also be able to reveal their counselling needs to available counsellors as this will go a long way in promoting their social inclusion, otherwise counselling services provided may make little or no impact among IDPs in Gombe metropolis.

CONCLUSION

The study was concluded as follows:

Counselling services provided for IDPs in Gombe metropolis influenced their access to social institution and participation but did not influence access to education and training as well as social inclusion. This reveals the need for a comprehensive counselling services for an all-round social inclusion among IDPs in Gombe metropolis since counselling is important for social inclusion.

RECOMMENDATIONS

Based on the findings of this study, the following recommendations are made:

1. Functional counselling centers should be established within the IDPs camps with a view to rendering professional counselling and other psychological services to the IDPs on a regular basis.

2. Social support services (such as working alliances and language and communication training) should be rendered and encouraged at the IDP camps in order to engage full participation of IDPs in group and community activities.
3. Appropriate support and assistance by the government, Non-Governmental Organizations (NGO's) and spirited individuals should be urgently channeled to the camps in order to meet the various needs (physical, psychological, emotional and social) of the IDPs.

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