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from Kidnapping Experience of 5 Victims and their
Significant others in Kaduna Metropolis, Kaduna State,
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Assessing the Extent of Post-traumatic-stress Disorder from Kidnapping Experience of 5 Victims and their Significant others in Kaduna Metropolis, Kaduna State, Nigeria

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Abstract

Purpose: Kidnapping has become a huge problem in parts of Nigeria such that residents of Kaduna metropolis who have become victims with their significant others are left to suffer varying levels of mental trauma. The study assessed kidnapping experiences and the Post-Traumatic experiences on the victims and their significant others in Kaduna Metropolis, Kaduna, Nigeria.

Methodology: A survey research design with snowball sampling method was utilized. A total of 10 male and female residents were participants in this study. Post-traumatic distress scale was used and interviews were conducted to collect quantitative and qualitative data respectively. The quantitative data was analyzed testing the hypothesis by way of independent T-test. The Qualitative data was analyzed using thematic narration. The hypothesis tested for the association between kidnap experience and PTSD of victims and their significant others in Kaduna metropolis, Kaduna State.

Findings: The study found that victims and their significant others suffered varying symptoms of PTSD stemming from the kidnap

experiences in Kaduna metropolis, having PTSD scores ranging from (1.5–3.7) on the PTSD scale as a result of kidnap experiences. Since all the p-values are greater than 5% level of significance, we therefore accept the hypothesis that there is no significant difference in the PTSD of kidnapped victims and significant others in Kaduna metropolis by way of the PTSD scale. Qualitative analysis revealed that the victims went through much traumatic experiences which had left them with trust issues and phobias, having changed their perspective on life as they once knew it.

Recommendation: The victims of kidnap and their significant others are in dire need of counseling therapy, psychological and or psychiatric intervention to limit disability as rehabilitation is vital. There is much needed social and financial support for victims, economic recovery schemes by federal and state governments are needed to minimize security issues.

Keywords: *Kidnapping, post-traumatic stress disorder, significant others*

INTRODUCTION

Kidnapping involves forceful abduction of individuals by another for various purposes which may be for physical, financial or political gains. Kidnapping is defined as the “act of seizing and detaining or carrying away a person by unlawful force or by fraud, and often with a demand for ransom (Ibrahim, 2017). Ransom kidnapping is the most-horrendous crime which puts the victims and their significant others through extreme physical, financial, psychological, emotional and social ordeals. Some victims are lucky to come out alive but unfortunately some die in the hands of their captors. The ones that are lucky to escape try to make the most of what is left of their life but many cannot cope and are left with gross emotional scars which often times do not heal. From the account of Constellis (2017), among more than 200 countries on ransom kidnapping, the topmost countries with the highest rate of kidnapping for ransom include: Libya, Nigeria, Venezuela, Mexico, Yemen, Syria, Philippines, Iraq, Afghanistan, and Somalia with these countries residents having to pay millions of dollars in ransom yearly.

During the slave trade era, many Africans were kidnapped from their homes, farms and sold into the Trans-Atlantic and other slave trade systems by the invading Europeans (Felton, 2009). The process of ransom kidnapping usually involves more than one individual, mainly carried out by two or more couple of persons who share the ransom money among themselves after doing the act. There exists division of labor in which several elements of the tasks are undertaken; ranging from being informants about prospective victims, movement of victim to an isolated area/building, getting food or drinks for the kidnapped, making the negotiations to get the ransom paid, collection of the ransom and release of victims/killing of victims.

Many victims of kidnap experience suffer symptoms of traumatic distress disorder such as phobias, anxiety, sleeplessness, flashbacks and nightmares secondary to the trauma experienced in the hands of their captors. Post-traumatic stress disorder is a clinical disorder that occurs after exposure to a traumatic situation, with lingering symptoms of hyper-arousal, recurrent intrusive thoughts of the event, negative thoughts of the event, self-blame and often self-destructive thoughts. According to American Psychological Association (2021), Post-Traumatic-Stress-Disorder is a psychiatric disorder after experiencing a traumatic event, often with disturbing thoughts and feelings of the trauma long after the incident has passed, leading to sad moods, fear, phobias and anger.

Victims of kidnap and their significant others suffer much mental trauma due to suffering and deprivation in the hands of the kidnapers. Studies by Abasiubong et al. (2014) found that relatives of kidnapped suffered from PTSD especially the females. Victims of kidnap suffer varying degrees of numbness, anger, guilt, depression, loss of memory and many have problems adjusting to life after the traumatic experience is over (APA, 2013). Abamara and Dike (2018) in a study found that many victims of kidnap continue to have depression, problems in social situations, anxiety, anger and other psychosocial problems due to the experience. Favaro et al. (2000) reported that kidnap victims suffered as an aftermath of the traumatic experiences from PTSD and even depression which had poor health outcomes

Statement of the Problem

Nigeria in the recent years ranks among the top ten countries with high kidnapping incidence globally (Akwash, 2016). The citizens of Kaduna state find it difficult to travel by road, boarding schools are clearly unsafe, the homes are rampaged and people kidnapped on a regular basis and businesses are taking a downward spiral due to people closing shops on time and some moving out of the state on a daily basis. The costs of the kidnappings are huge thus people are constantly in a state of despair, fear and apprehension due to the physical, mental and

financial torture associated with people's kidnap experiences. Kidnapping has become a frequent occurrence in Kaduna State as scarcely does a day pass without a news report of kidnap event. The psychological distress comes from the Post-Traumatic Stress in victims of kidnappings and also the fear of being re-kidnapped. The recent upsurge in kidnappings in northern Nigeria tends to change the narrative as it has taken a horrendous dimension thus attracting attentions of both local and international communities (Ayuba, 2020).

Many schools in Kaduna has been raided for ransom kidnappings and homes have not been spared, many largely unreported in the news media. Many kidnap incidents occurred in parts of Kaduna, among them the forceful abduction of 37 students from the Federal College of Forestry, Afaka (Hassanwuyo, 2021) many spending months in captivity and hundreds of millions of naira requested as ransom before being released from captivity. Several students and lecturers of Zaria polytechnic were kidnapped from the school premises (Wuyo, 2021), eventually being released without publicizing if ransom was paid or not as well as the Emir of Kajuru who was whisked away on the 11th of July 2021 with 13 of his subjects leaving much fear in the wake of the attacks and abductions (Akubo et al., 2021). Many acts of kidnapping occur without being reported. Many of these victims undergo much distress as an aftermath of the experiences and many lack coping skills as they suffer silently, both they and their significant others even after release from their abductors.

Objectives of the Study

The general objective of the study is to access the levels of Post-Traumatic Stress Disorder among kidnap victims and their significant others in Kaduna metropolis. The specific objective of this study

1. To find out the levels of Post-traumatic stress disorder among kidnap victims and the significant others.
2. To find out if there is significant difference between the PTSD of kidnapped victims and significant others in Kaduna metropolis.

Research Questions

1. What are the levels of Post-Traumatic Stress Disorder among kidnap victims in Kaduna metropolis?
2. Is there any significant difference between the Post-traumatic stress disorder in kidnap victims and their significant others in Kaduna metropolis?

LITERATURE REVIEW

Kidnapping means forceful abduction of persons by other persons which could be for varied reasons. The crime of kidnapping for ransom has become the main security threat in Nigeria with not less than 4962 persons kidnapped between January 2015 and July 2020, with several being kidnapped more than once (Ibekwe & Alabi, 2021). The crime of kidnapping in Nigeria is a rising phenomenon generating global concerns. Kidnapping has become a major trade and income generator in Northern Nigeria with parts of Zamfara, Yobe, Katsina and Kaduna States being most hit. Okoli (2019) as cited in Bello (2022) argues that "Nigeria has one of the world's highest rates of kidnap-for-ransom cases" This upsurge has generated much fear and panic among residents of these northern states such that the kidnapped and their families go through Post traumatic Stress Disorder as the recurrent thoughts of what happened and the fear of happening again is engraved in the minds of the victims and their significant others even while they are trying to get adjusted to life after the event.

Theoretical Review

Janoff-Bulman's Shattered Assumptions Theory:

Janoff –Bulman’s (1992) shattered assumptions theory is a theoretical construct that psychological trauma can change one’s view of self and vulnerability, control of events and the world view in general (Edmondson et al.,2011). Assumptions are threatened and human vulnerability is exposed, making assumptions of why the event occurred including self-blame and for what purpose. The high opinion people have formed of themselves if broken can cause emotional torment which is distressful.

According to Jannoff-Bulman and Frieze (1983), there are 3 ways the trauma changes one’s perspective of the world and of them which are:

1. One’s view of his/her non-vulnerability
2. One’s view of the world.
3. One’s positive view of himself

According to the “Shattered Assumptions Theory” the trauma shakes the initial perception of the person of oneself as invulnerable, that the world is kind and benevolent into a belief that he or she is not as inviolable, the world is not as benevolent and things are not as stable or predictable as once thought. Variability in trauma response in those exposed to the same trauma can be positive, fixed or negative depending on the interpretations by the person. Different kinds and grades of trauma happen to people from time to time, and while some have less anxiety, helplessness and sadness about the past events, some may have more of these negative emotions than others. According to Janoff, the extent of how the trauma events affect individuals vary according to the way the trauma shocked and shifted the person’s initial perspective of life, the initial mind-set towards the world, the set of beliefs about oneself and of people in general .

Januff Bulman’s Theory (1989) of shattered assumptions after a traumatic event poses that prior to a traumatic event, people lived life and carried on because their basic assumptions were never challenged , when there is trauma, the basic schemas by which people lived , the initial cognition of their self -esteem, of people’s benevolence and of some control of world events become changed as new cognitive processes take over as the trauma experience and the coping skill changes one’s world view of life in general. When people’s way of thinking has not been confronted or disputed, assumptions of how strong we are and can control events, or that people are generally nice are intact but these basic life assumptions experience a flip side after a traumatic event happens.

Coping strategies according to Janoff-Bulman

There are various coping strategies to carry on in life according to this theory:

Denial: This happens when the recurrent thoughts are too much to bear and so the person puts off the event as if it never happened as a way of coping.

Interpretation of the event as positive: This occurs if a lesson is learnt or reappraisal of their life is undertaken.

Behavioral self-blame: The person involved acknowledges their behaviour at that instance could have averted the traumatic outcome. This type of self-blame helps the people adapt and still believe the world is benevolent and that they are still worthy.

Character logical self-blame: This is counter-productive and the person simply puts himself down character-wise, believing he/she deserved the negative outcome of event.

Recurrent intrusive thoughts: Repeated thoughts of the traumatic event which may bring on fear and shame, very distressful to the individual.

The dramatic change in the initial assumptions of those kidnapped and their significant others of their strengths, positivity about themselves, about life, interpersonal relationships and of the world being shattered brings up confusion and a lack of meaning in life which affects their trust, brings up doubt and affects self-esteem and their sense of self-worth. Many of these people develop trust issues towards people and their environment, phobias, anxiety, mental stress from reminders of the event.

Kidnapped victims and their significant others may take up any of the above coping mechanisms and inability to accept what has occurred can cause serious psychological distress and consequent Post Traumatic Stress disorder in victims and their significant others. Many become afraid to stay home, to go to school and to enter public transport. These fears are inhibiting and interfere with quality of life. No one thinks in their wildest imagination that they will be kidnapped just moving around Kaduna zone, so the traumatic event of being in the hands of kidnappers and being denied of basic freedom of movement and of choice, being brutalized physically and emotionally, changes the person's initial assumptions of life, opening up questions of vulnerability, lowering self-worth and esteem due to inability to have control over events.

Empirical Review

Study by Wright et al. (2017) on Iraqi refugees in the war-torn country one year post exposure in which those kidnapped and not kidnapped were both assessed for post-traumatic stress disorder and major depression which showed that kidnap victims suffered more from post-traumatic stress disorder than from major depression compared with those not kidnapped. The results showed that both the victims and relatives of kidnap had similar levels psychological trauma. The significant others of those kidnapped are in daily turmoil about the welfare of their family members as they have to negotiate for financial payments, pray and hope their loved ones will not be maimed, tortured or killed which affects their quality of life as the uncertainty of having loved ones back from captivity is quite distressing.

However, a Kaduna-based study of impact of PTSD on kidnap victims and kidnap news on residents of Chikun Local government area of Kaduna state (Shekwolo et al., 2020) found that though kidnapping is a common occurrence in the area, resulting in mild PTSD of victims and residents attribute to family ties and social relationships, hence corroborating the findings by (Spilman, 2006), that social support helped the coping skills and hence minimized the trauma of kidnap in victims. Cultural attributes may thus have an impact on the psychological orientation of victims of kidnap and hence influence ability to adapt and cope with life's events. Study on 116 Yazidi women with average age of 32.2 years who were exposed to violence revealed the women suffered from Post-Traumatic-Stress-Disorder years after leaving captivity and those in longer captivity read higher PTSD scale (Denkinger et al., 2021).

METHODOLOGY

Research Design

The research design was a cross-sectional study design in which no variable was manipulated, the people lived in various parts of Kaduna metropolis, had experienced the kidnappings while their significant others were the closest person to these victims.

Participants

There were 10 participants in all, 5 kidnap victims and each of their significant others. The victims were 4 males and 1 female and their significant others were 4 males and 1 female, all living in several parts of Kaduna metropolis. The participants were aged 15 years to 40 years. The victims were 2 uneducated males, 2 educated males and 1 educated woman out of which the uneducated males were small private business owners who were self-employed. The significant others were 4 males and 1 female, out of which 2 males were public servants and the other 3 (2 males and 1 female) were small private business owners.

Sampling Size and Technique

The sampling size was 10, and the sampling technique used was the snowball sampling technique in which participants were gotten by referral.

Instrument

The Post Traumatic Stress Disorder Scale (Weathers et al., 1994) was the instrument used in this study. Post-Traumatic Stress Disorder (PTSD) Scale –PCL-C. The PCL-C is a self-assessment scale for PTSD comprises of a 17-item structured interview to assess the (DSM-IV) symptoms of PTSD. The aim of this scale is to: Screen for PTSD, make a provisional diagnosis of PTSD and to monitor the symptoms during and after treatment. This is the civilian version which shows the severity of Post-Traumatic Stress disorder. According to the National Centre for PTSD (2021), this PCL-C is psychometrically sound and the rating should not be solely used to make a diagnosis but a structured interviewing should be incorporated before making a diagnosis of PTSD certain, which reflects symptoms in the last month. Scoring of PCL-C Scored by adding up all items for a total severity score or treat response categories 3–5 (Moderately or above) as symptomatic and responses 1–2 (below Moderately) were regarded as non-symptomatic, then use the following DSM criteria for a diagnosis.

The scale is made up of a 4 scale rating with answers from “Not at all” to “Extremely”. PCL is Scored by adding up all items from each of the 17 items for a total severity score (range = 17-85). While 17-29 cut off shows little to no severity; 30 to 44 signify moderate severity while 45 to 85 shows high severity. With summing up of the different clusters A to E showing severity scores. Interviews were also conducted for the participants who narrated their ordeals as they answered some questions put to them. The interview questions were 17 in number comprising experiences during and after the release from captors, their perceptions on life before and after captivity among other questions.

Procedure

The Procedure was the identification of people who had been kidnap victims, seeking their informed consent concerning participation in this study. There were referrals as information gathering was done as per who and who had been victims, the victims being located, pointed out their significant others who were also assessed using the PTSD scale and interviewed. The participants were informed of their right to discontinue from participating if they so desired and informed that the research was for educational purposes and that confidentiality would be maintained as names and numbers were not sought from them.

Statistical Technique

The Statistical Package for Social Sciences (SPSS) was used to analyze the data from the questionnaires. The data was analyzed and the Test of hypothesis was done using inferential

statistics. The significant difference between PTSD of victims and significant others was done using the independent T-test.

RESULTS

Table 1: Frequency and percentages of characteristics of participants

	Demographic variable	Frequency	Percentages
Age	Less than 18yrs	3	30.0
	18 -30yrs	4	40.0
	31 – 43yrs	3	30.0
Gender	Male	8	80.0
	Female	2	20.0
Ethnic origin	Yoruba	2	20.0
	Igbo	1	10.0
	Hausa/Fulani	7	70.0
Educational level	Primary/Secondary	4	40.0
	Tertiary	6	60.0
Level of income	Less than ₦30,000.00	3	30.0
	₦30,500.00 – ₦90,000.00	4	40.0
	Above ₦90,000.00	3	30.0
Religion	Christianity	4	40.0
	Islam	6	60.0

Table 1 shows the demographic attributes of the 10 participants used in the study showing that 80% were males, 60% of participants had tertiary education, 40% had average salaries of 30-90,000 naira while 60% are of Hausa –Fulani extraction.

Hypothesis: There will be a significant difference between the PTSD of kidnap victims and their significant others in Kaduna Metropolis.

Table 2: PTSD of Kidnap victims and significant others in Kaduna metropolis

Items	Sum	Mean= (Sum/10)
Repeated, disturbing memories, thoughts, or images of stressful experience from the past	35	3.50
Repeated, disturbing dreams of stressful experience from the past?	32	3.20
Suddenly acting or feeling as if a stressful experience were happening again (as if a stressful experience were happening again (as if you were reliving it)?	27	2.70
Feeling very upset when something reminded you of a stressful experience from the past?	32	3.20

Having physical reactions (e.g heart pounding, trouble breathing, or sweating) when something reminded you of a stressful experience from the past?	28	2.80
Avoid thinking about or talking about a stressful experience from the past or avoid having feelings related to it?	37	3.70
Avoid activities or situation because they remind you of stressful experience from the past?	29	2.90
Trouble remembering important parts of s stressful experience from the past?	29	2.90
Loss of interest in things that you used to enjoy?	19	1.90
Feeling distant or cut off from other people?	23	2.30
Feeling emotionally numb or being unable to have loving feelings or those close to you?	20	2.00
Feeling as if your future will somehow be cut short?	15	1.50
Trouble falling or staying asleep	19	1.90
Feeling irritable or having angry outburst?	17	1.70
Having difficulty concentrating?	19	1.90
Being "super alert" or watchful on guard?	36	3.60
Feeling jumpy or easily started?	17	1.70

Table 2 showed the PTSD scores which indicated that kidnapped victims and Significant others in Kaduna metropolis experienced a PTSD score on a scale 1.5-3.7 as a result of the kidnap experiences. Majority (64%) of the participants had minimum score of 2 on the PTSD scale indicating symptomatic response.

Table 3: Independent sample t-test for PTSD on kidnapped victims and significant others

Items	Kidnap Experience	Mean	Std.	t-cal	p-val
Repeated, disturbing memories, thoughts, or images of stressful experience from the past	Victims	3.20	1.64	-0.64	0.540
	Sig Others	3.80	1.30		
Repeated, disturbing dreams of stressful experience from the past?	Victims	3.00	1.87	-0.39	0.704
	Sig Others	3.40	1.34		
Suddenly acting or feeling as if a stressful experience were happening again (as if a stressful experience were happening again (as if you were reliving it)?	Victims	2.20	1.64	-1.07	0.318
	Sig Others	3.20	1.30		
Feeling very upset when something reminded you of a stressful experience from the past?	Victims	2.60	1.67	-1.10	0.305
	Sig Others	3.80	1.79		

Having physical reactions (e.g heart pounding, trouble breathing, or sweating) when something reminded you of a stressful experience from the past?	Victims	3.00	1.41	0.54	0.608
	Sig Others	2.60	.894		
Avoid thinking about or talking about a stressful experience from the past or avoid having feelings related to it?	Victims	4.20	.837	1.89	0.095
	Sig Others	3.20	.837		
Avoid activities or situation because they remind you of stressful experience from the past?	Victims	3.00	1.871	0.20	0.849
	Sig Others	2.80	1.304		
Trouble remembering important parts of a stressful experience from the past?	Victims	2.80	1.48	-0.23	0.822
	Sig Others	3.00	1.26		
Loss of interest in things that you used to enjoy?	Victims	1.40	.548	-1.27	0.240
	Sig Others	2.40	1.67		
Feeling distant or cut off from other people?	Victims	2.80	2.05	1.01	0.342
	Sig Others	1.80	.837		
Feeling emotionally numb or being unable to have loving feelings or those close to you?	Victims	2.20	1.64	0.43	0.681
	Sig Others	1.80	1.30		
Feeling as if your future will somehow be cut short?	Victims	1.60	.894	0.43	0.681
	Sig Others	1.40	.548		
Trouble falling or staying asleep	Victims	1.80	.837	-0.54	0.608
	Sig Others	2.00	.000		
Feeling irritable or having angry outburst?	Victims	1.80	1.30	0.32	0.760
	Sig Others	1.60	.548		
Having difficulty concentrating?	Victims	2.00	1.73	0.21	0.842
	Sig Others	1.80	1.30		
Being "super alert" or watchful on guard?	Victims	4.20	1.79	1.12	0.29
	Sig Others	3.00	1.58		
Feeling jumpy or easily started?	Victims	1.60	.548	-0.45	0.67
	Sig Others	1.80	.837		

Table 3 showing the independent sample t –test on victims and significant others. To assess validity of the null hypothesis whether the calculated t-value is greater or less than the critical t-value at 5% level of significance, there is the need to know the degrees of freedom (*d. f*):

$$d. f = (n1 - 1) + (n2 - 1)$$

$$d. f = (5 - 1) + (5 - 1) = 4 + 4 = 8$$

$$t_{critical} = t_{0.025,8} = 2.306$$

Since all the p-values are greater than 5% level of significance, the hypothesis is accepted that there is no significant difference in the PTSD of kidnapped victims and significant others in Kaduna metropolis by way of the PTSD scale.

Qualitative Analyses

Qualitative data collected in the form of interviews and analysed from the ten participants: (5) kidnapped victims and (5) significant others within Kaduna Metropolis. The analysis was carried specifically based on their experiences during their kidnap or the Kidnap of their relatives as follows;

1. Why is kidnapping on the rise? All the 10 people interviewed indicated that kidnapping is on the rise and some of the reasons given by the victims were; poor governance, unemployment, general insecurity and poverty.

2. How do you grade the problems of kidnapping? On a scale of 1-10, nine (9) out of ten (10) of the participants rated kidnapping above seven (7), hence a very high rating of severity in the state.

3. How long was your duration in captivity)? In the words of the participants:

One of the participants "*I was kidnapped for 5 days*" Another said: "*I was kidnapped for 2 months*"

4. What are your experiences during the time in captivity? The participants explained the experiences encountered during the kidnapping, almost all said the experience was terrifying, agonizing, very bad and traumatizing. One participant stated: "*It was agonizing, remembering it brings back fresh memories, it was really bad*". Another participant said: "*It was very, very bad. It was unexplainable, the beating, embarrassment and even sexual assault of those in captivity*"

5. How did you afford the ransom? According to the interview carried out, some of the participants indicated that they got the money for the ransom through God's intervention; some of them sold their properties and loans while some got it through contributions from friends and well-wishers. Hence half of the participants sold their properties while half were from social support. One participant said: "*My properties were sold, i basically lost everything*"

6. Do you have flashback of the traumatic experience? : Eight (8) out of ten (10) participants indicated that they often have flashbacks of the traumatic experience. Having flashbacks of the traumatic experiences is a symptom of Post-Traumatic Stress disorder which is common among kidnap victims. "*Yes, especially the killing of 5 students from Greensfield's University, Kaduna*"

7. Do you experience any intrusive thoughts or do you suddenly remember the bad ordeal? All the participants indicated that they often remember the bad ordeal they experienced in the hands of the kidnapers. One victim re-iterated "*Whenever I hear someone is kidnapped, I just recall the trauma I passed through*"

8. Do you often feel agitated that it will happen again? Eight (8) out of the ten (10) participants admitted that they often feel agitated that the kidnap experience will happen again.

9. Do you still enjoy your favourite activities? Most of the participants said they no longer enjoy their favourite activities as before. Most have reduced travelling to the barest minimum. One participant stated: "*I love travelling, but have reduced it drastically*"

10. Do you feel safe? Most of the participants said they don't feel safe anymore. One participant stated *"I have not been myself up till now; my friend's daughter is still in captivity"*. Another stated: *"I am not too positive about life, based on the happenings of the day"*

11. Do you avoid places that remind of the incident? : All the participants indicated that they avoided places that reminded them of kidnap incidents, except one who was in her house when kidnapped; she lives in the same house still.

12. Do you have night mares or sleepless night problems? : All the ten (10) participants indicated that they occasionally have night mares or sleepless night. Some of their reasons are based on flashback or reflection of the past, one said she regularly gets agitated around 1.00 am as she was abducted by 1.00am, Another victim said he becomes afraid when dogs are barking, as the dogs barked just before he was kidnapped.

In the words of a participant: *"I do have nightmares and sleepless nights of the incident"* Another participant said: *"When I hear barking dogs, I have flashbacks"* *"I do have nightmares and sleepless nights of the incident"*

13. Have you suffered any panic attack since the incident? Out of the ten (10) participants, three (3) of the participants indicated that they suffered panic attacks since the incident.

14. Are you more on guard or security conscious? : All the participants indicated that they are more on guard and more security conscious compared to before.

15. Have you experienced change in your personality? Nine (9) out of the ten (10) participants indicated that their personality had changed. Almost all the participants reported of having less friends since after the abduction, as they have become less trusting of people. *"I have become extra careful, I feel like being alone, and I am scared sometimes."* Another answered: *"I have stopped some things, like unnecessary visitation to places or to friends."*

16. Do you blame yourself for what happened? Eight (8) out of ten (10) participants said they don't blame themselves over what happened. A participant (a parent) said: *"Yes, i blame myself because I wanted to change my son to another school but a friend advised me to leave him as he had just a year left to graduate, hence I left him but he was kidnapped from the school."* A student said: *"Yes, because I ran out of my hostel into their hands as they shot into our hostel sporadically, I regret not hiding inside"*

17. How did you cope and how have you been coping still? Most coped in the hands of their abductors by being positive about life, and this has been their coping skill since out of captivity. Only one went to seek professional help from a psychotherapist, the rest just has support of family and friends, reviewed their assumptions about life while remaining positive about life and the turn of events, one by indulging more in playing games to feel good.

In the words of a participant: *"I took some time away, travelled somewhere to think about my life, I always try to do what will keep me happy, my friend could not cope, as he was found to have committed suicide later"*. In the words of a participant: *"I coped through therapy from psychologist, physical treatment and positivity of mind-set"*

DISCUSSION

The purpose of this study is to ascertain the extent of Post-Traumatic Stress Disorder among victims and their significant others in Kaduna metropolis. Victims of kidnap in Kaduna and their significant others alike suffered recurrent intrusive thoughts of the traumatic event, flashbacks, angry outbursts, lack of concentration and inability to focus with self-blame due to inability to cope with life after the experience. The participants had scores ranging from 1.5 to

3.7 on the PTSD scale according to the self-reports; From this study, the majority of victims and significant others had scores on the PTSD scale showing symptomatic, which indicates many of the victims and significant others had mild to moderate symptoms of Post-Traumatic Stress Disorder; this is in line with the findings of Dinnen et al. (2015) that traumatic stress disorder is very common among kidnap victims, and to findings by Taha and Sijbrandij (2020) that severe mental distress was very common among female survivors in IDP camps, causing mental health problems despite duration in captivity be it young or older victims and to studies by Mahmood et al. (2019) who found significant levels Post Traumatic Stress disorder and depression among Syrians affected by war trauma, trauma being is common in war-like situations. According to Ene (2018), most of the kidnapped victims often displayed attributes of mistrust and fear of travelling especially at night or even use commercial mobility to their various destinations

The effect of the traumatic experiences of the kidnap experiences had impact on the victims and significant others as most of the victims and significant others experienced a mild to moderate score of severity using the PTSD scale. Both the victims and their relatives had similar scores on the PTSD scale, hence there is no significant difference between the psychological distress of kidnapped victims and that of significant others in Kaduna metropolis by way of the PTSD scale, this is similar to findings by Wright et al.,(2017) that submitted that relatives of kidnap victims suffered from Post –traumatic stress disorder and major depression. Submissions by US Hostage (2020) indicated that families of the kidnapped suffer many cognitive, emotional and social problems as family members find it difficult to sleep, eat, focus and may suffer Post Traumatic Stress Disorder and hence need much psychological and social support.

Symptoms of post-traumatic stress disorder include repeated thoughts of the stressful event, having fear that the event will happen again, physical symptoms like heart pounding, headaches and stomach aches associated with thoughts of the stressful event and loss of interest in hobbies and activities which were initially enjoyable. Many of these symptoms were experienced by the victims and significant others. Many of the victims reported inability to associate well with friends again as their world view of events had changed, their initial thought of a benevolent meaningful world have changed and so did their mindset of control of events. Many did not think this traumatic event could happen to them as they did not assume the world was this wicked, corroborating the propositions of the Janoff Bulman’s Shattered assumptions theory of Post-traumatic stress disorder.

Most of the victims have had a rethink about closeness to friends and interpersonal relationships have been hampered as an aftermath of the events and the sense of control of events has been turned around as the world being just and fair and the idea that humans deserve what happens to them has changed as they did not know they could become victims, this is in line with the Janoff Bulman’s theory that states that before traumatic events, people have some set of assumptions about life and control of events, but after a traumatic event, these basic assumptions are shattered and a flip side occurs with respect to the initial assumptions and people may experience a change in personality .

CONCLUSION

Kidnap survivors and their significant others have had to suffer much psychological trauma, stemming from the harrowing experiences in captivity. Recurrent intrusive thoughts, self-blame and guilt all contribute to the recurring mental trauma when the incidents come to mind. Peoples view of life changes as a result of traumatic experiences as phobias and distrust are

stimulated, causing social dilemma. Victims of kidnap and their significant others have similar degrees of Post-traumatic Stress Disorder from the experiences.

RECOMMENDATIONS

From the findings of the study, these recommendations are made

1. Psychological counselling and psychiatric attention is highly needed due to the extent of post-traumatic stress disorder among victims and significant others is alarming as most have moderate symptoms of PTSD .
2. Much long-lasting social support is required to booster the coping strategies of these victims and significant others to dampen the long-lasting effects of recurrent intrusive thoughts, self-blame and guilt which foster depressive states as studies have shown that social support aids recovery.
3. State governments should render financial assistance to victims that have lost their finances due to ransom payment to kidnapers.
4. The federal government of Nigeria should as a matter of urgency secure the state and rid the populace of the menace of traumatic kidnap experiences.

Significance of Findings

More mental health workers are required to attend to victims and significant others in Kaduna metropolis to avail recovery from the trauma of kidnappings as the mental trauma both in victims of kidnap, that of their families and the residents in general signals poor quality of life. The results of this study calls for urgent policy making and enforcement of harsher punishments to offenders for deterrence sake is vital for more safe and peaceful neighbourhoods.

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