

Educational Effect, Health Hazard And Psychological Trauma Of Boko Haram Insurgency On Women And Children's Livelihood In Borno State: A Chronology

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Abstract: Security situation has been reported by many researchers to have been the deadliest disaster to human on the planet earth. A situation where peace, freedom, health, love and quietness prevails giving guarantee and assurance for life, health and full opportunities for the development of individuals, families, communities and countries in all areas of endeavors to maximum capacity. But at a time, this condition was almost forgotten in the north-eastern Nigeria. The emergence of Boko Haram has cut short the development in Borno state to the minimum level most especially in areas of education, health and psychology. This research is reporting a chronological testament and empirical study on the effect of this Ungodly state of being. The research was piloted under three major objectives; to determine the effect of the insurgency on education, to determine the effect of the insurgency on health and to determine the effect on psychology of women and children. The findings of this research were as follows; that diseases like; diarrhea, malaria, cholera, chickenpox and other airborne diseases have greatly affected the internally displaced persons in Maiduguri Camps, that there has been a great educational backwardness on the IDP in Maiduguri camps since there is no record of good educational setting either informal or formal education in the camps; and that the effect of psychological trauma has been high on women and children in most cases as found out by the result, about 76.5% of the cases of trauma are on women and children than on men. It is against these findings that the researchers came out with the following recommendations (a) health centres equipped with adequate facilities should be put in place in all the IDPs camps, (b) a formal educational facilities such as school, vocational/ skill acquisition centres should be made a priority in rehabilitating the IDP, (c) also government and stakeholders should be involved directly in rehabilitating the traumatized patients. The researcher also recommends that research should be encouraged towards the area of IDPs looking at areas like long-term effect of; psychological trauma, being displaced etc.

Keyword: Educational effect, Health hazard and psychological trauma, Chronology in Borno State

I. BACKGROUND

Human being by nature has placed five major factors to be at the top list of their existence; these are food, health, shelter, clothing, security and knowledge (education). A traditional list of immediate "basic needs" as stated by Ghai,

(1978) is food (including water), shelter and clothing. Many modern lists emphasize the minimum level of consumption of 'basic needs' of not just food, water, clothing and shelter, but also sanitation, education, and healthcare. Different agencies use different lists. The basic needs approach has been described as consumption-oriented, giving the impression

"that poverty elimination is all too easy. These factors entail the livelihood of human on the surface of the earth.

The emergence of Boko Haram in the north eastern part of Nigeria has cut short the peace, communion and trust of people living in the affected areas. A direct testimony by respondents have shown that trauma have taken away the truth of many affected individual living then with only the scar of sad memories. In this paper, the chronicle of what seems to have been the remnant of memories of the affected persons will be reported.

II. OBJECTIVE

This research work is aimed at determining the effect of Boko haram on

- ✓ Education of women and children living in Borno state
- ✓ Health hazards of women and children living in Borno state; and
- ✓ Psychological trauma caused by Boko haram on women and children living in Borno

III. RESEARCH QUESTIONS

- ✓ What is the condition of education of women and children living in Borno state?
- ✓ What health hazards are women and children living in Borno state exposed to?
- ✓ Are there cases of psychological trauma as caused by Boko haram on women and children living in Borno?

IV. CHRONICLE

Borno state is one of the 36 states of Nigeria; it is located at the North Eastern Region of the country. Borno shares border with Niger, Chad, and Cameroon. The boko Haram otherwise known as Jama'atul Ahlus-Sunnah Liddawati Wal Jihad was founded in 2002 in 'Maiduguri' the capital city of Borno state. North Eastern Nigeria by Muhammad Yusuf known as (Yusufiyya) the Pioneer leader and originator of Boko Haram group. The name Boko Haram as it applies mean "Western education is forbidden". This is the meaning in Hausa language. The group opposed Western education and in fact anything to do with Western.

The group moved from Maiduguri to Kanamma town in Yunusari Local government area of Yobe State in the year 2004 and set up a base there. They used to attack Police stations, schools and were so much interested in bringing Shariah Law to be imposed all over the country, that the system the Nigerian government is operating is rotten and corrupt. They vowed that they would conquer the region and create their own separate states to practice their own religion.

Prior to their movement to Yunusari, Kanamma town in Yobe state, a lot of students who were studying in University of Maiduguri in the Medical College, Law, and in many professional courses in their final year and some in 300, 200 and 100 levels abandoned their studies and joined the group. Many children who were from wealthy parents and

enlightened parents left school and joined the group. The group used to visit settlements and towns in the state for da'awa that is (preaching) there by convincing them that the religion they are practicing is not correct that their own sects way of Islam is the right one. This was how they gained acceptance from a lot of people who became his followers (Muhammad Yusuf).

The North Eastern region suffered most from the hands of Boko Haram. The three states that are immensely affected are Borno, Yobe and Adamawa. It is believed that Boko Haram controls about 20,000 square miles in Borno and Yobe states. In Borno particularly, fourteen local government areas out of the twenty seven were under the control of Boko Haram in early 2015, the number later increased to twenty-four LGA's out of the twenty-seven in 2015 (Narrative from eyewitness).

The International Rescue Committee estimated that as many as 1,000 refugees a week are crossing the Nigeria-Niger boarder into Niger's Diffa region, four out of five people are women and children, who flee helplessly in the face of Boko Haram's violent attacks. Beyond the widespread displacement, many children are killed or orphaned and many women are killed or widowed by these terrorist acts. Over 2million people are displaced and 120% of these refugees are women and children (SEMA, 2016).

On the 17th of July 2009, the group came out to the streets of Maiduguri shouting the slogan of 'Allahu Akbar, Allahu Akbar' with their guns and the fire exchange between them and the police force began, the battle took 3days until when troops from Army Barracks Jos arrived and destroyed their base called 'Markas' in Railway Quarters and killed most of them while many left Maiduguri to other places. Their leader Muhammad Yusuf was also killed in the same years.

From the 2009 and 2010 following the assumption of the new leadership headed by Abubkar Shekau, Boko Haram reinvented violence and began what can best be described as the bombardment of Northern Nigeria, Adamu (2009). Boko Haram continued their brutality increasingly in the year 2010 during that time; a lot of Policemen, Army, State Security Service Officers, Nigerian Immigration Officers, and Customs Officers were killed sporadically in Maiduguri and Damaturu. Imams, religious leaders, school teachers, students both male and female were killed on their way to school or at school premises.

V. HEALTH HAZARD

This deadly act of terror has posed a serious pandemic on the people living in the north eastern part of Nigeria, especially people of Borno, Yobe and Adamawa states. As a result of this insurgency thousands of individual have been displaced from their towns, villages and homes living in a highly congested areas and camps; which exposed them to vulnerability to many form of communicable diseases, like; cholera, measles, chickenpox, diarrhoea etc. Environmental health hazards may be biological, chemical, physical, biochemical, or psychosocial in nature. Environmental hazard include traditional hazard of poor sanitation and shelter, as well as agriculture and industrial contamination of air, water, food and land. Internally displaced persons are groups of

people who have been forced or obliged to flee or leave their homes or places of habitual residences. However, each one of the two terms: hazard and disaster mean different things. Earth scientists consider hazards as features or events that are hazardous or harmful and result in injuries or loss of life and property. Technically therefore, environmental hazard refers to a naturally occurring or man-made geologic, ecological atmospheric condition or phenomenon that constitutes some risk to the quality of the environment or is a potential danger to life and property. The emphasis here is on the impact of physical events on human beings and their environment, that according to Alexander (1993) "unless this Conjunction occur 'there will be no hazard. It involves the human population placing itself at risk from geophysical event."

Environmental hazards are broadly classified into four major groups. Based on geophysical constituents, these are: geological, ecological, atmospheric and structural. The geological problems include diverse geological Phenomena such as earthquakes, volcanic eruptions, floods, landslides. Subsidence, tsunamis, soil creep, and glacier burst among others. The ecological hazard, which result from the interplay between geological problems and/or the human use of environmental resources, include: - soil degradation, deforestation, wild life extinct, and water resource degradation. However this consist of drought, atmospheric pollution. The structural hazard, on the other hand, comprise of man-made induced and man-assisted problems such as noise pollution, traffic congestion, improper waste disposal, and dam failure among others. It is a paradox that Nigeria is a rich country inhabited by the poor and accounts for about 13% (1.4 million) of Africa's 11.1 million persons internally displaced by conflict and generalized violence at the end of 2011. In Nigeria, a total of 1,934,765 displaced persons, IDPs, are currently living in formal camps, host communities and satellite camps in liberated communities as a result of insurgency in the North Eastern States of Borno, Yobe, Taraba, Gombe, Bauchi and Adamawa states, (Premium, April 26th, 2016). This gave raise to the high out break of diseases such as cholera in the host communities.

VI. PSYCHOLOGICAL TRAUMA OF WOMEN AND CHILDREN

It has also been reported that about 52,000 patients have active files with the psychiatric hospital in Maiduguri, the reporter said that the case load has doubled since Boko Haram launched its campaign of killing and kidnapping. These patients include a 6-year-old girl who saw Boko Haram murder her parents, her file says it now frequently interrupts her class by shouting: "They're here!"

Boko Haram has burned down villages, shot rockets into homes, and beheaded drivers on highways in its campaign to impose Islamic law. It has forced both boys and girls into its ranks—and the recent abduction of nearly 300 schoolgirls brought the group global attention. One of the doctors, Babagana Machina, says soldiers and suspected Boko Haram members alike have marched into his office, each of them exhibiting symptoms of post-traumatic stress disorder. After five minutes of therapy and a prescription for cheap

antidepressants, they leave through the crowded waiting room. Some of them will tell you that they killed even their parents," said Dr. Machina, who qualified to practice psychiatry just last year.

Boko Haram insurgents increasingly killed men in areas they capture living women and children with the dead bodies of their husbands and fathers in the compound or outside on the road side of the towns for them to bury the corpses of their loved ones. Women buried their loved ones killed by the group. These towns include Bama, Gwoza, Minchika, Askira, Marte, Baga, Monguno, Dikwa, Ngala etc. leaving over 50,000 women widowed and 60,000 children orphaned (UNICEF, 2015). The group in 2013, forcefully married girls from their parents at the payment of N2,000 as dowry or without anything. A lot of girls, thousands in number were abducted from villages and none has returned back up till now. In the year 2014, the security situation in the North east especially Borno, Adamawa and Yobe states worsened. The highest casualty figures stemming from the months of April, women became the bread winners of their homes after their husbands were killed, they were forced to go and look for jobs as house helps with their daughters in Maiduguri just to keep the family fed. Many girls roam the streets of Maiduguri hawking. In May, 2014. The factors correlated with the growing instances of attack against women and girls; most vividly with the widely reported kidnapping of 270 secondary school girls from the town of Chibok in April the same year. Using women as hostages for strategic gain is now a primary tactics of insurgent groups; a strategy that was first employed in Bama kidnappings of girls in exchange for the terrorist group demanded the release of their members. A spokesman from the group once warned that "No one in the country will enjoy his women and children" if this condition was not met, West Africa Insight (2015).

VII. EXPERIENCES OF WOMEN AND GIRLS CAPTURED BY BOKO HARAM

The experiences are described in vivid reports as it range from instances of forced labor, and narrative of physical and psychological abuse. The women are forced to cook and clean for their captors, sexual abuse, rape and forced marriages which is a common experience for women in captivity. This was narrated by a 19 year old girl who recounted her experience while held captive.

"At fist my job in the camp was to cook for the 14-man group until a month later when I was taken along for an operation. They told me to hold the bullets and lie inside the grass while they fought. They came for me for extra bullets as the fight continued during the day. When the security forces arrived at the scene and began to shoot at us, I fell down in fright". The insurgents dragged me along on the ground as they fled back to camp.

A case of forced labour is shown in a report of women forced to harvest groundnuts on a farm in a village that had been attacked. Cases of active participation show the roles of support women play within Boko Haram and diverge from victimization as a traditional narrative of women's role within conflict. A recent tactics of Boko Haram show that women

who experience victimhood can simultaneously act in supportive capacities within insurgent groups. The agency of women in the military operations of Boko Haram can be described in terms of active or coerced participants. Women act as logisticians and recruiters. Reports also confirm the use of girls in transporting IEDs in food containers. Women are also deployed by the group in order to lure security forces into ambush and act as spies for locating targets for attack. Targeting of women is an important aspect of the operations of Boko Haram; as women and girls do not only account for a considerable amount of victims attacked, but have also become instrumental as weapons of war in the group's campaign of insurgency (Human Right Watch, 2015).

VIII. EFFECTS OF TRAUMA AND STRESS OF BOKO HARAM INSURGENCY AND IT'S CONSEQUENCES ON WOMEN AND CHILDREN

There are mild and moderate stress reactions in the early post-impact phases of disaster. They are highly prevalent because survivors (and their families, community members and rescue workers) accurately reorganize the danger in disaster, Young et al (1998). Although stress reactions may seem 'extreme', and cause distress, they generally do not become chronic problems. Most people recover fully from even moderate stress reactions within 6 months – 1 year Baum & F. Tenning, (1993).

However, some people will be more affected by a traumatic event for a longer period than others, depending on the nature of event and the individual who experienced the event. The experience of women in the hands of Boko Haram is more than a moderate traumatic stress because when they narrate their experiences, they feel it is still fresh in their memories and one sees the signs of psychological disorder and stress because they have watched their loved ones slaughtered like animals or killed with gun and left for them to bury.

Stressful experiences are not only limited to traumatic life events, but includes stress in everyday life, and this is what exactly women and children are suffering from in Borno State. Women and children who experience the insurgency in Borno State, especially those from the two badly affected areas of Bama and Gwoza show the everyday post-war stress ranging from personal health, social changes, separation, illness. Death of family members or friends and associated with general psychological symptoms. The number of women and children with trauma in Maiduguri IDP camps are one hundred and eighty three as at the time of this report. The number has increased to 1,800 and above with the recent women and children who were brought back from the insurgents camps by the JTF.

IX. EDUCATIONAL EFFECT

The devastation and destruction of both human lives and properties inflicted upon those living in the states are beyond imagination. The importance of education in the life of a person can never be overemphasizes in both temporal and spiritual aspects of human existence. Education is very

paramount, it is the light that shows the way by removing the darkness of ignorance. It is the salts that gives taste to life. The greatest favors one can do to himself is to get educated and to others to give them education. Insurgency, violence, conflicts or war, threats of such intimidation or an abuse can have very serious and permanent effects on education thus not only slowing down any progress or development of potentialities available giving prominence to mediocrity as the priority because of excellence. When and where there is insecurity the priority becomes survival. That is the first natural instinct. The other entire thing, education inclusive becomes Secondary Schools are closed , pupils and students stay out of school or institution for as long as the insecurity persists where school building and properties were destroyed or looted, the situation becomes more complex, the effects more challenging . Sad as this situation may look if is better than cases where students are pursued and killed in their schools. This can be more brutal? Evil? How can there be education if there are no people to receive education? Students and pupils that are lucky to escape such brutality may be marred physically, intellectually or psychologically for life, and sentenced for a life cripple. Students in all the public schools have stayed at home without going to school for four years. Some have resumed but a lot of the Secondary Schools that were used as IDP camps are still closed in Borno state particularly.

X. RESULTS

The result obtained from this research work was tabulated into three major tables. Table 1.1 displays the measurement of the effect of insurgency on health of the IDPs, table 1.2 displays the educational effect of the insurgency on the IDPs while table 1.3 displays the traumatic effect of Boko haram on the livelihood of the IDPs. Different rating/ measurement scale were employed in this analysis; the details of the results are displayed in tables below.

Variables	Rating			Total
	High	Low	Not available	
Informal education	15 (5.0%)	21 (7.0%)	264 (88.0%)	300
Religious education	45 (15.0%)	61 (20.3%)	194 (64.7%)	300
Formal education	98 (32.7%)	90 (30.0%)	112 (37.3%)	300
Adult Education	124 (41.3%)	74 (24.7%)	102 (34.0%)	300
Skill training	78 (26.0%)	102 (34.0%)	120 (40.0%)	300

Table 1.1: Educational effect: (Rating the dispensing of Education)

Table 1.1 above shows the rating of education dispensed to the IDPs in Maiduguri camps. From the result, when asked to rate the type of education at their disposal in the camps, 5.0% of the IDPs rated informal education high, 7.0% rated it low, while majority 88.0% rated it not available. Religious education was also rated high by 15.0% of the respondents, 20.3% rated it low while most 64.7% of the respondents said it

is not available at all. Only 32.7% of the total respondents rated formal education as high, 30.0% rated it low, while majority 37.3%) rated as not available. A good percentage 41.3% of the total respondents rated adult education as high, 24.7% rated it low, while 34.0% rated as not available. On skill training, 26.0% of the respondent rated it high, 34.0% rated low, while 40.0% rated it as not available. This result have shown that there has been a great educational effect on the IDPs in Maiduguri camps since there is no record of good educational setting either formal and informal in all of the camps. It can be deduced that children and youths in the camps do not have access to both formal and informal education.

Outbreaks	Rating			Total
	High	Low	None	
Airborne disease	198 (66.0%)	90 (30.0%)	12 (4.0%)	300
Cholera	211 (70.3%)	78 (26.0%)	11 (3.7%)	300
Malaria	216 (72.0%)	65 (21.7%)	19 (6.3%)	300
Chickenpox	200 (66.7%)	89 (29.7%)	11 (3.7%)	300
Diarrhea	271 (90.0%)	20 (6.7%)	9 (3.0%)	300

Table 1.2: Measurement of the Effect of Insurgency on Health

Table 1.2 describes the various diseases that were discovered to be associated with all the IDP camps visited for this research work. The result presented here shows rating of the respondents based on what they witnessed. From the result, diarrhea was found out to be more common in all the camps as there was a total of 271(90.0%) of the respondents rating it to be high, and only 3.0% claims none. In addition, malaria followed with a rating of 72.0% as high, 21.7% as low while only 6.2% claims none. Others are chickenpox with 66.7% of the respondents rating it high, 29.7%) rating it low while only 3.7% claims that there is no trace of chickenpox in the camps. Also, 66.0% of the respondents rated airborne diseases to be high, 30.0% rated it low, while only 4.0% rate it none. From this result, it could be deduced that diseases like; diarrhea, malaria, cholera, chickenpox and other airborne diseases have greatly affected the internally displaced persons in Maiduguri Camps.

Variables	Rating			Total
	High	Low	None	
Children	264 (88.0%)	21 (7.0%)	15 (5.0%)	300
Women	112 (37.3%)	98 (32.7%)	90 (30.0%)	300
Men	61 (20.3%)	194 (64.7%)	45 (15.0%)	300

Table 1.3: Effect of Psychological trauma: (Rating the effect of trauma)

Table 1.3 above shows the rating scale of the effect of psychological trauma. From the result, a total of 88.0% of the respondents rated the effect of psychological trauma high in children, 7.0% rated low while only 5.0% rated it as none. Effect of trauma on women was rated high by 37.3% of the respondents, 32.7% rated low, while 30.0% rated it none. Trauma effect on men was rated as high by only 20.3% of the

respondents, 64.7% rated low while 15.0% rated it none. From this result, it could be concluded that the effect of psychological trauma has been high on women and children in most cases as found out by the result.

XI. FINDINGS

The following findings were observed;

- ✓ That there has been a great educational effect on the IDPs in Maiduguri camps since there is no record of good educational setting either formal or informal in all of the camps.
- ✓ That disease like; diarrhea, malaria, cholera, chickenpox and other airborne diseases have greatly affected the internally displaced persons in Maiduguri IDP Camps.
- ✓ That the effect of psychological trauma has been high on women and children in most cases women and children developed a traumatic state leading to hatred, slow learning ability and dissociation (isolation).

XII. DISCUSSION

The result of this research found out that, there has been a great educational effect on the IDPs in Maiduguri camps since there is no record of good educational setting either formal or informal in all of the camps. This research finding also supported the work of Elizabeth (2010) who reported in her work Education and Displacement: Assessing Conditions for Refugees and Internally Displaced Persons affected by Conflict. That persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized State abroad. She also added that the communities hosting refugees and IDPs, particularly when the numbers are large, clearly experience economic, social and political consequences for doing so. Sometimes this is positive as when the establishment of a camp provides health or education services to the local community – services which may not have been available in the past. But often it has a negative result as community and public services are strained. Governments of countries hosting large numbers of refugees may fear that they will cause political problems, stir up ethnic grievances, and cause long-term economic and environmental damage most especially to the educational aspect of life.

Also the result found out that diseases like; diarrhea, malaria, cholera, chickenpox and other airborne diseases have greatly affected the internally displaced persons in Maiduguri IDP Camps. This work agreed with the report presented by Anike Nwodo (2015), who reported that Sixteen people have been reported dead and 172 are in critical conditions after Cholera outbreak affected three Internally Displaced Persons (IDPs) camps in Maiduguri, Borno state due to improper management of the spread of the disease.

Psychological trauma as defined to be the type of damage to the psyche that occurs as a result of a severely distressing

event; and trauma is often the result of an overwhelming amount of stress that exceeds one's ability to cope, or integrate the emotions involved with that experience. The effect of this trauma was also found out in this work; as it states that the effect of psychological trauma has been high on women and children; in most cases as women and children have developed a traumatic state leading to hatred, slow learning ability and disassociation (isolation). Studies of traumatic bereavement have identified traumatic circumstances as one of major factor that can lead to mental disorder and its long term effect can even lead to death, Lundin (1984).

XIII. CONCLUSION

Countries' or nations' development is weighted by the level of education of its citizens both male and female. That is why "education for all" is strongly recommended and focused by government of Nigeria. Government has made a tremendous progress in this sector but despite this effort, literacy rate is still nothing to ride home about in the northeastern part of the country. So many factors have been militating the educational sector ranging from sociocultural, religious and resistance problems, and now the Boko haram incident. Boko harma have played a major role in the increase of illiteracy in the northeaster Nigeria, with Women and children have suffered a lot of physical, emotional and psychological trauma in past six years of intense Boko haram activities in the north east especially Borno state where the problem originated. The emergence of Boko haram has cut short the development in Borno state, most especially in areas of education, health and psychology. Internally displaced persons are no longer having proper access to education, good health facilities and good psychological counseling. Their productivity have been shattered by restricted freedom to movement, to education and good health, hence as found out by the result of this research.; therefore the research have concluded that; educational programmes and facilities, health centers and counseling units should be put in place in other to rehabilitate the victims of insurgency.

XIV. RECOMMENDATION

The researcher after analyzing the result obtained and outlining the findings of the research, came out with the following recommendations;

- ✓ Formal schools should be made available in all the IDP camps within and outside Maiduguri. And vocational skills acquisition centers to be provided in all the camps as well.
- ✓ health centers equipped with adequate facilities should be put in place in all the IDPs camps, this should made a priority in rehabilitating the IDPs,
- ✓ government and stakeholders should be involved directly is rehabilitating the traumatized patients.

The researcher also recommend that research should be encourage toward the area of IDPs looking into areas like long – term effect of; psychological trauma, staying displaced etc.

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