

INFLUENCE OF POST-TRAUMATIC STRESS DISORDER ARISING FROM FEELING OF INSECURITY ON SCHOOL ADJUSTMENT AMONG SCHOOL CHILDREN IN ENUGU STATE

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Abstract

This study was designed to investigate the influence of Post-Traumatic Stress Disorder (PTSD) arising from feeling of insecurity on school adjustment among school children in Enugu State. The study adopted ex-post-facto research design. A sample of 962 (534 primary school children and 428 secondary school children) selected using multi-stage sampling technique was used for the study. Two research questions and three null hypotheses guided the study. Instruments used were Posttraumatic Stress Diagnostic Scale (PDS) by Foa (1995) and School Adjustment Scale (SAS). Cronbach Alpha was used to establish the reliability of the instrument, with reliability indices of 0.71 for School Adjustment Scale. Research questions were answered using descriptive statistics of mean and standard deviation. Analysis of Variance (ANOVA) was used to test hypotheses one and two and t-test statistic was used to test hypothesis three. The null hypotheses were tested at 0.05 level of significance. The findings among others revealed that greater number of the primary school children whose PTSD were moderate adjusted better in school than their counterparts who had mild and severe PTSD; there was a significant difference between the levels of PTSD severities with regard to primary school children's mean school adjustment. Based on the findings of the study, it was recommended among others that measures should be taken to ensure that the Nigerian child is free from insecurity and threat to ensure proper school adjustment

Keywords: Post-Traumatic Stress Disorder, Insecurity and School Adjustment

Introduction

Alarming national figures describe the extent to which school children are vulnerable to the experiences of facing negative consequences associated with threats, insecurity and mayhem caused by Fulani herdsmen. Observational data on secondary school students indicate that most students have serious emotional and behavioral disorders. Some pose on-going problems to classroom teachers, while others find it difficult to adjust to school programmes. Many of the problematic behaviors exhibited in school may be attributed to unresolved trauma and anxiety which are highly correlated with academic difficulties such as poor adjustment, readiness and attendance rate, and negative social, emotional and psychological outcomes.

There has been a strong emphasis on the importance of school adjustment as a means by which school children will be able to cope with school factors and emerge successful citizens of their nation. Adjustment has been defined in various ways by psychologists to mean a process of maintaining harmonious relationships between a living organism and its environment (Raju and Rahamtulla, 2007). In maintaining harmony, the individual attempts to deal with stress, tension, conflicts and meet his or her needs while making efforts at the same time. Weiten and Lloyd (2003) defined adjustment as the psychological processes through which people manage or cope with the demands and challenges of everyday life. This implies that the individual and the environment are two important factors in adjustment. Adjustment covers an attempt to maintain a harmonious relationship between an individual and his present environment which could be family, church, office, market place, school among others.

School adjustment is the degree of school acculturation required or adaptations necessitated for maximizing the educational fit between students' unique characteristics and the distinct nature and requirement of learning environments (Opara & Onyekwuru, 2013). Agbakwuru and Agbakwuru (2012) defined school adjustment as the process of bringing an individual's behaviours in conformity with the norms of the school setting. It is a continuous process that is geared towards the adaptation of the individual to school life and culture. It can be taken to mean the process the students adopt in maintaining a balance between their academic, social, and emotional needs and the school environment. This is to say that a students' school adjustment depends on the match between their competences, needs and demands of the school environment.

The demands of school environment imply that the students will be emotionally stable, academically and morally fit so as to be able to achieve the nation's objectives of education as stipulated in the National Policy on Education 2014 pg.22. When students are capable of matching their needs with the demands of school environment, they are said to have adjusted properly in school. Adjustment potentials enable students to deal better with pressures of academic challenges, emotional upheaval, peer pressure, and involvement in disruptive behaviours such as temptation of alcohol, drugs and illicit sex which are prevalent among secondary school students (Raver & Knitze, 2002). However, in Nigeria, students' willingness to adjust in school have been hampered by students' experiences inside and outside school environment. Inside the school environment, studies reveal that students are found to be confronted with lack of close teacher-student relationships, increased levels of problem behaviorus such as bullies, theft, rape, vandalism, threats from cult groups and lack of opportunities for positive social interactions such as within school and inter-school sports competitions, debates, quiz and symposia (Adeyemo, 2005; Agbakwuru & Agbakwuru, 2012). Outside the school environment, it was revealed that millions of school children in Nigeria are caught up in conflicts and violence that result to insecurity not only in their lives and property but on the stability of their emotions after the trauma of such conflicts. These insecurity experiences could create

emotional imbalance in the students which will not support their psychological wellbeing especially their adjustment in school.

The insecurity state of a person is an emotional problem, a state of being in disturbance due to the feeling of tension, strain and conflict together with other consequences of tension, e.g. nervousness, anxiety and trauma (Okorie, 2011). An insecure person perceives the world as a threatening jungle and most human beings as dangerous and selfish; feels rejected and isolated; anxious and hostile; is generally pessimistic and unhappy; shows signs of tension and conflict; tends to turn inward; is troubled by guilt feelings; tends to be neurotic and selfish (Maslow, 1943). Thus school children who have senses of insecurity in them are quiet, recessive, withdrawn, nervous and prone to anxiety (Akevi, 2014). Such students have traits that could help them achieve their objectives in school such as are generally of normal intelligence, well behaved, amenable and conscious, not giving much troubles, but they are internally perturbed and are quiet, dreadful of what might happen to them and so are full of anxiety and feeling of insecure that they tend not to adjust proper in school. This is to say that the feeling of insecurity is not an inborn trait but the product of environmental influences on individuals.

Insecurity is linked to chronic threats of attack, disease, hunger, terrorism and poverty which culminate into emotional imbalance (McCawley, 2004). Nigeria in our current democratic dispensation is bedevilled with fears of one attack by one extremist group or the other (Okorie, 2011) Hostage taking, bomb throwing (explosion) and violent crimes are now part of the daily life of Nigerians (Fasan, 2011). There has been incidence of armed robbery, kidnapping, political thugs, ethno-religious conflicts, organized violent groups, economic based violence, gender-based violence, sexual abuse, trafficking Boko Haram and recently the menace posed by Fulani Herdsmen in the different communities as their migration for purpose of grazing their cattle is becoming very alarming (Ubelejit, 2016).

In recent times, Enugu State, Uzo-Uwani Local Government Area in particular have been experiencing security threats because of the activities of Fulani herdsmen. It was revealed that people no longer go to the farm nor sleep well at night for fear of aggressive attacks by the herdsmen (Ubelejit, 2016). The activities of this group alone have displaced many families from their home town and as a result forced many children of formal education to abandon school due to fear from terror. Severe levels of terror may expose students to all kinds of security threats which will thereafter culminate into trauma.

A traumatic event is a sudden and unexpected occurrence that causes intense fear and may involve a threat of physical harm. According to Elbert, Schauer, Schauer, Huschka, Hirth, and Neuner, (2009), traumatizing events results in individuals in three major symptom areas: hyper-excitability (anxiety and over - responding to stimuli), re-experiencing (flashbacks and nightmares), and social withdrawal or emotional remoteness (numbing). A traumatic experience is found to have profound effect on the physical health, mental health, and development of the individuals particularly school children (McDonald, Jouriles, Tart, & Minze, 2009). Bostock, Plumpton, and Pratt (2009) reported that traumatized experience in school

children may cause ongoing feelings of concern for their own safety and the safety of others. They may become preoccupied with thoughts about their actions during the event, often times experiencing guilt or shame over what they did or did not do at the time. They might engage in constant retelling of the traumatic event, or may describe being overwhelmed by their feelings of fear or sadness.

Traumatizing events can take a serious emotional toll on the victims, even if the event did not cause physical damage. Also, it can seriously interrupt the school routine and the processes of teaching and learning. There are usually high levels of emotional upset, potential for disruptive behaviour, or loss of student attendance unless efforts are made to reach out to students. Students traumatized by exposure to insecurity have been shown to have lower grade point averages, more negative remarks in their cumulative records, and more reported absences from school than other students (McGaha-Garnett, 2013). They may have adjustment problem occasioned by increased difficulties in concentrating and learning at school. On the extreme, such students may show a change in their school performance, attendance, adjustment and behaviour. Given these situation, there is an increased need for school personnel to address the effects of insecurity on students' school adjustment.

With repeated exposure to traumatic events, a proportion of individuals may develop disorders characterized as Posttraumatic Stress Disorder (PTSD) (Aisenberg, Trickett, Mennen, Saltzman, & Zayas, 2007). Schwartz and Davis (2006) defined Post-traumatic stress disorder as a condition where an individual has recurring distressing memories, flashbacks and other symptoms after having or witnessing a traumatic event. Traumatic Stress Disorder (PTSD) is a mental disorder that arises from the experience of a traumatic event of an exceptionally threatening character, which is likely to cause distress to the victims. The strict definition of PTSD is that the trauma experienced or witnessed must be severe; for example: a severe accident, rape, a life-threatening assault, torture, seeing someone killed, in which the individuals feel intense fear, helplessness or horror.

After terror attacks or natural disasters, many survivors show transient symptoms of distress, sadness, and anxiety, which may resolve on their own (Norris, Friedman, Watson, & Byrne, 2002). In some people PTSD develops soon after the trauma, however, in some cases the symptoms first develop several months, or even years, after the trauma. Aisenberg et.al. (2007). Individuals respond to PTSD in seemingly event or series of events with symptoms like depression, anxiety or relationship disorders, and emotionally traumatizing events, recurring thoughts, memories, images, dreams, or flashbacks of the trauma which are distressing. They try to avoid thoughts, conversations, places, people, activities or anything which may trigger memories of the trauma, as these make you distressed or anxious. They have feelings emotionally numb and detached from others. Adams and Boscarino (2005) found that such individuals mostly loss of interest in activities which one used to enjoy and find it difficult to plan for the future. Difficulty in getting off to sleep or staying asleep. Being irritable which may include outbursts of anger. Difficulty concentrating, increased vigilance and being more easily startled than you were before.

Studies on prevalence of Posttraumatic Stress Disorder (PTSD) in low income countries are quite few as compared to the developed world (Mugisha, Muyinda, Wandiembe & Kinyanda 2015; Canetti, Galea, Hall, Johnson, Palmieri & Hobfoll, 2010; Bass, Annan, Murray, Kaysen, Griffiths & Cetinoglu, 2013). However, the studies that have been conducted in both high income and low income countries indicate that war and political violence are associated with high rates of PTSD (Joop, De Jong, Komproue, Ommeren, ElMasri & Araya, 2001; Thabet, Abed, Vostanis, 2004; Ovuga, Boardman & Wasserman, 2005). The prevalence rates in areas that have suffered from political conflict have ranged from zero percent (0.0 %) in conflict affected areas in Iran to 99 % in Sierra Leon (Steel, Chey, Silove, Marnane, Bryant & Ommeren, 2009).

Also, studies conducted in Uganda during active conflict reported rates of PTSD that varied between 18 % and 54 % (Karunakara, Neuner, Schauer, Singh, Hill & Elbert, 2004; Onyut, Neuner, Ertl, Schauer, Odenwald & Elbert, 2009; Bell & Song, 2005). Some cross-sectional studies undertaken in Africa indicate that PTSD can still be a public health concern several years after the civil conflict (Pharm, Weinstein & Longman, 2004; Rieder & Elbert, 2013), while Kuwert, Spitzer, Träder, Freyberger & Ermann, 2006) in a study conducted in Germany makes a similar observation. There are however few or no studies on the prevalence of PTSD and its associated factors in Nigeria particularly in Enugu State especially those focusing on insecurity of lives and property related to threat and terror. Yet, this information is important for the planning of services to address post-terror emotional conditions of the vast affected population in Nigeria.

Enugu State especially Uzo-Uwani LGA went through terror following invasion of Ukpabi-Nimbo community, known as "Enugu Massacre" (The New Terror Threat, 2016). The mayhem was on the people of Nimbo (also Ukpabi-Nimbo) where seven villages- Ekwuru, Nimbo-Ngwoko, Ugwuijoro, Ebor, Enugu-Nimbo, Umuome and Ugwuachara were invaded, and scores massacred by over 500 armed Fulani herdsmen, rated the fourth deadliest terror group in the world (Global Terrorism Index, 2016), in the early hours of April 25, 2016. The herdsmen, who reportedly were bent on occupying a portion of the farming community's land for cattle grazing plotted attack, and went on to notify the natives about their invasion on April 23, 2016 (Nwodo, 2016). It was gathered that the natives alerted the police and other security authority upon the receipt of the invasion but little or no attention was paid to the report until there was an attack by the herdsmen.

As a result of the attack, displaced natives fled to nearby communities of Nkpologu and Uvuru, (Uvuru-Agada) even as indigenes of those communities also fled to Nsukka in fear of further attacks. These massacre experiences can significantly contribute to mental illness (Amone-P'Olak, Nyeko, Opio, Ovuga & Meiser-Sterdman, 2014) including PTSD. In addition to the experiences mentioned above, due to the direct and indirect consequences of terror, many families in Uzo-Uwani remain impoverished even after the massacre with inadequate food, poor health care, limited chances for education among other vulnerabilities (Buratai, 2016; Amadi & Amadi, 2017). Also, most primary school children have permanently

dropped out of school either as a result of the death of their parents or as a result of the fear of sporadic attacks. Though, the federal government effort in curbing the activities of herdsmen have made appreciable success, schoolchildren in the primary and secondary schools find it difficult to adjust to school environment and be able to face their academic pursuit. These efforts are however, being hampered by the lack of up to date information on the state of the emotional security of the population including information on the burden of the massacre related to PTSD and school adjustment level of school children among the population. This study attempts to address this deficiency by finding the effect of PTSD arising from the massacre on school children adjustment to school. Specifically, the study is geared towards finding the effect of PTSD arising from insecurity on primary school adjustment of primary school children. Also, it seeks to find the effect of PTSD arising from insecurity on secondary school adjustment of secondary school students.

Two research questions and three null hypotheses guided the study and they include:

1. What is the influence of PTSD on the primary school children's school adjustment?
2. What is the influence of PTSD on secondary school children's school adjustment?

Ho₁ There is no significant difference between the mean ratings of primary school children with PTSD and school adjustment.

Ho₂ There is no significant difference between the mean ratings of secondary school children with PTSD and school adjustment.

Ho₃ There is no significant difference between the mean ratings of secondary and primary school children with PTSD and their school adjustment

Methods

The study was carried out in Uzo-Uwani Local Government Area of Enugu State. Population of the study comprised of all the school children (both primary and secondary) in Uzo-Uwani LGA who were permanently residing in Uzo-Uwani during the crisis "Enugu massacre" in 2016-2017 academic year. The sample consisted of 962 (534 primary school children and 428 secondary school children) selected using multi-stage sampling technique. Firstly, stratified sampling was used to stratify primary school children into primary and secondary school levels. Simple random sampling was used to select 6 schools (3 primary schools and 3 secondary schools) from the primary and secondary schools in the LGA. Finally, purposive sampling was used to select both primary and secondary school children who participated in answering the research questions.

The instruments used were standardized Posttraumatic Stress Diagnostic Scale (PSDS) by Foa (1995) and School Adjustment Scale (SAS). PSDS was used to assess severity of PTSD symptoms in the last one year and five months of Herdsmen attack in the region. The PSDS has four sections. Part 1 is a trauma checklist. In Part 2, respondents were asked to describe their most upsetting traumatic event. Questions

specifically ask about when it happened, if anyone was injured, perceived life threat, and whether the event resulted in helplessness or terror. Part 3 assesses the PTSD symptoms. Respondents were asked to rate the severity of the symptom from 0 ("not at all or only one time") to 3 ("5 or more times a week / almost always"). Part 4 assesses interference of the symptoms.

Using a four-point scale, respondents then rated 17 items representing the cardinal symptoms of PTSD experienced in the past one year and five months. Finally, respondents rate the level of impairment caused by their symptoms across nine areas of life functioning. A diagnosis of PTSD was made only when DSM IV criteria A to F were met on a response options of 0 Not at all or only one time, 1 Once a week or less/once in a while, 2–4 times a week/half the time, and 3 5 or more times a week/almost always. The PSDS includes a symptoms severity score which range from 0 to 51 and this was obtained by adding up the individual's responses of selected items. The cutoff for symptom severity rating were 0 no rating, 1–10 mild, 11–20 moderate, 21–35 moderate to severe and 36 severe.

School Adjustment Scale (SAS) has 20 items. All the items were in four points Likert type with the following response options- Strongly Agree (SA), Agree (A), Disagree (D) and Strongly Agree (SA). These response options were weighted 4, 3, 2, and 1 respectively for positive items and 1, 2, 3, and 4 respectively for negative items. The instruments were developed by the researchers. SAS was face and content validated by experts in Educational Psychology, Measurement and Evaluation. The reliability coefficient of 0.71 was obtained via Cronbach Alpha method. The researchers used the direct delivery approach for the administration of the two instruments. After that, the items of the instruments were scored and data analysis was done using descriptive statistics of mean and standard deviation to the answer the research questions, while Analysis of Variance (ANOVA) was used to test hypotheses one and two and t-test statistic was used to hypothesis three. The null hypotheses were tested at 0.05 level of significance.

Results

Table 1: Mean and Standard deviation of the influence of PTSD on the primary school children school adjustment

PTSD	N	Adj. Mean	SD
Mild	210	2.75	0.38
Moderate	254	3.34	0.24
Severe	70	2.32	0.32
Total	534	2.80	0.22

Results on primary school children PTSD as a result of their exposure to insecurity and their school adjustment are presented in Table 1. The results showed that among the primary school children, 210 have mild PTSD and school adjustment mean of 2.75 with standard deviation of 0.38, 254 have moderate PTSD and school

adjustment mean of 3.34 with standard deviation of 0.24, while PTSD was server on 70 whose school adjustment mean is 2.32 with a standard deviation of 0.32. This is an indication that a greater number of the respondents whose PTSD are moderate adjusted higher in school than their counterparts who had mild and severe PTSD.

Table 2: Analysis of Variance (ANOVA) of the significant difference in the mean rating of primary school children with PTSD and school adjustment.

	Sum of Squares	Df	Mean Square	F	Sig	Decision
Between Groups	2.842	2	1.421	14.298	0.00	S
Within Groups	52.764	531	0.099			
Total	55.606	533				

The result in Table 2 shows that an F-ratio of 14.298 with associated probability value of 0.00 was obtained with regards to the influence of PTSD on primary school children school adjustment. Since the associated probability (0.00) was less than 0.05 set as the benchmark for taking a decision, the null hypothesis (H_{01}) which stated that there is no significant difference in the mean rating of primary school children with PTSD and school adjustment was therefore rejected. The inference drawn is that there is a significant difference between the levels of PTSD severities with regard to primary school children mean school adjustment. This is to say that exposure of school children to hazards which will thereafter result to PTSD influences their school adjustment.

Table 3: Mean and Standard deviation of the influence of PTSD on the secondary school children school adjustment

PTSD	N	Adj. Mean	SD
Mild	6	2.75	0.08
Moderate	111	2.43	0.46
Severe	311	2.91	0.19
Total	428	2.69	0.17

Results on secondary school students PTSD as a result of their exposure to insecurity and their school adjustment are presented in Table 2. The results showed that among the secondary school students, 6 have mild PTSD and school adjustment mean of 2.75 with standard deviation of 0.08 which is an indication that the degree of scatter between the level of PTSD and school adjustment is in closed variation as compared to other levels of PTSD. 111 students have moderate PTSD and school adjustment mean of 2.43 with standard deviation of 0.46, while 311 students have severe PTSD and school adjustment mean of 2.91 with a standard deviation of 0.19.

This is an indication that PTSD was mild on few of the respondents, while it was severe on majority of them and students in both severities adjusted better in school compare to their counterparts whose PTSD was moderate with mean school adjustment of 2.43.

Table 4: Analysis of Variance (ANOVA) of the significant difference in the mean rating of secondary school students with PTSD and school adjustment.

	Sum of Squares	df	Mean Square	F	Sig	Decision
Between Groups	25.791	2	12.896	1536	0.00	S
Within Groups	35.662	425	0.084	84		
Total	61.453	427				

The result in Table 4 shows that an F-ratio of 153.684 with associated probability value of 0.000 was obtained with regards to the influence of PTSD on secondary school students' school adjustment. Since the associated probability (0.00) was less than 0.05 set as the benchmark for taking a decision, the null hypothesis (H_{02}) which stated that there is no significant difference in the mean rating of secondary school students with PTSD and school adjustment was therefore rejected. The inference drawn was that there is a significant difference in the mean ratings of secondary school students with PTSD and their school adjustment.

Table 5: Analysis of Variance on the significant difference between the mean ratings of secondary and primary school children with PTSD and their school adjustment

Levels	Number	Mean	SD	t-value	df	Sig	Decision
Primary	534	2.80	0.22	2.57	960	0.01	S
Secondary	428	2.69	0.17				

The result on table five show the t-test analysis of the significance between the mean ratings of secondary and primary school children with PTSD and their school adjustment. The result shows that the t-value of 2.57 with a degree of freedom of 960 and a probability value of 0.01 was obtained. Since the probability value of 0.01 is less than 0.05 level of significance, the null hypothesis was therefore rejected. Inference drawn is that there was a significance difference between the mean ratings of secondary and primary school children with PTSD and their school adjustment.

Discussion

One of the results of the study revealed that a greater number of primary school children exposed to insecurity had moderate PTSD adjusted better than other children who have mild and severe PTSD. This could be attributed to the moderate influence of the attack on them as majority of the children did not observe the attack as it occurred instead they heard of it. This finding lends support to research suggesting that indirect exposure to large-scale traumatic events may not have the

same effect on the people as though they observed the event as it occurred (Sedam & Ford, 2007). The finding also agrees with that of Karunakara, Neuner, Schauer, Singh, Hill and Elbert (2004) which study revealed that the severity of attack on the victims determines its effect on them. Thus, when attack is complex, it can have lasting effect on victims than when it is mild or moderate. Their study was carried out in Uganda while the present study was in Nigeria. Not minding the diversities the results are the same. A corresponding hypothesis revealed no significant difference in the mean rating of primary school children with PTSD and school adjustment was therefore rejected.

Another result of the study indicated that majority of secondary school students exposed to insecurity had severe PTSD and poor school adjustment than other students who have mild and moderate PTSD. The higher rate of PTSD and the resultant poor school adjustment could be attributed to the age of the students as the point of attack. School adjustment is essential for the academic growth of any child. When there are security crisis, it may affect the rate of children's school adjustment. The finding is consistent with the finding which revealed that after terror attacks or natural disasters, many survivors show transient symptoms of distress, sadness, and anxiety, which may resolve on their own (Norris, Friedman, Watson, & Byrne, 2002). Oladunjoye and Omemu (2013) in their studies on effect of boko haram on school attendance in northern Nigeria found a significant difference in school attendance among rural and urban schools in areas prone to Boko Haram attacks. A further test of hypothesis revealed a significant difference in the mean ratings of secondary school students with PTSD and their school adjustment.

Finally, the influence of PTSD on primary and secondary school children also vary in their rate of school adjustment as revealed in the result in H_{03} . The primary school child is often guided and directed by their parents. They feel more assured in the presence of their parents more than their secondary school counterparts. When there is a security problem, parents will definitely protect their children by keeping them indoors, if possible; out of school for that period until adequate security measures are put in place by the government. The secondary school students on the other hand have grown to internalize the experience and develop sense of insecurity more than their counterparts. They feel little freedom to decide whether to go to school or not, some may risk by going to school at the heat of such attack, thus could be exposed to varying degrees of man slaughter. This finding contradicts the finding of Akintoye (2010) which revealed that irrespective of age, sex and nationality, once there is an attacks by the Boko Haram, the survivors often dread staying in such places and may hesitate sending their children to school especially when they are not too sure of the security measure that have been put in place. The study was carried out in the northern part of Nigeria while the present study was carried out in the eastern part of Nigeria.

Conclusion

The present research made it possible to empirically examine the influence of PTSD arising from insecurity on school adjustment among school children in Enugu

State. The influence of PTSD converged on three important severities: mild, moderate and serenity. The result of the study indicated that the influence of PTSD was moderate on primary school children and that resulted to their moderate school adjustment. Also, PTSD was found to be more severe on majority of the respondents in the secondary school stream and that led to their poor school adjustment. Finally, the result of the study indicated that a significant difference between primary and secondary school students in their response to insecurity which later culminated into PTSD.

Recommendation and Implications of the Study

The results of the study have some far reaching implications. For instance, the results indicated that PTSD has significant influence on school children adjustment to school. Measures should be taken to ensure that the in and out of every Nigerian child is free from insecurity and threat to ensure proper school adjustment. The results of the study also imply that variation in the levels of education influences their development of PTSD and consequently their adjustment to school. Education stakeholders should derive means of resuscitating victims after exposure to attack.

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