

Anticipatory Traumatic Reaction: A Framework for Understanding Northern Nigerians' Outcry Against ECOWAS' Military Option in Niger

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ABSTRACT

Research suggests strong links between threat-related media exposure and adverse psychological effects. Given the ubiquitous access to news and real-time events in society and the propensity for disaster-related news to include numerous scenes and detailed descriptions of human suffering, consumers of media reports are often exposed not only to distressing material but also threats of future disasters, and they may react in ways that mimic responses to trauma. Anticipatory traumatic reaction (ATR) describes how individuals may respond to imminent danger to which they are exposed by consuming disaster-related news. This interpretive position paper used the ATR framework to provide insight into northern Nigerians' perception of media stories about the possibilities of a military engagement between ECOWAS' standby force and the coup leaders in neighbouring Niger, and their subsequent outcry against ECOWAS' military option in Niger. Because individuals depend on news media for information during crises, this paper suggests that ethically motivated constructive journalism must be sensitively balanced with productive and engaging rolling coverage of real-time threat-related events to prevent traumatization through media exposure to large-scale threats. It might be beneficial for mental health practitioners to recognize ATR symptoms and integrate them into therapy approaches to help their clients. Further research is necessary to expand the toolkit of clinical psychology to mitigate and treat this subclinical phenomenon among individuals and communities.

Keywords: Anticipatory Traumatic Reaction, Northern Nigerians, Military Junta in Niger, Exposure to Threat-Related Media Reports, Trauma, Collective Trauma

INTRODUCTION

The *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5) [1] names post-traumatic stress disorder (PTSD) and acute stress disorder (ASD) as mental conditions that could result from an individual's exposure to a traumatic event, and limits the criteria for diagnosing these conditions to having direct exposure to trauma. However, researchers and clinicians have criticised this limiting definition of trauma to having direct exposure [2], citing other trauma-related phenomena like secondary trauma [3], vicarious trauma [4], and intergenerational trauma [5] as mental conditions that develop not from direct but indirect exposure to traumatic events through learning about the traumatic experiences of others. Besides, researchers have found that media (traditional and social) can act as a conduit for trauma [6], even though the DSM-5 explicitly states that exposure to life-threatening events must be in person to meet the criteria for diagnosing PTSD and that media consumption cannot constitute exposure to trauma for a diagnosis of PTSD.

As scholars continue to recognise and categorise traumatic responses that fall outside the parameters of the DSM-5, Hopwood and colleagues [7] conceived the term "anticipatory traumatic reaction" (ATR) to describe the future-focused distress that can result from continuous viewing of media reports of possible disasters. It refers to a form of distress rooted in uncertainty and the fear of future events evoked by

secondary exposure to trauma via media reports and social discussions of imminent large-scale negative events or threats. The purpose of this interpretive position paper is to discuss ATR as a framework for understanding how individuals may respond to imminent danger, with a particular focus on the exposure of northern Nigerians to media stories about the possibilities of a military engagement between ECOWAS' standby force and the Nigerien military regime.

This paper is organised into seven sections as follows. Section one presents a brief introduction, including the purpose of the paper. Section two describes the military junta in the Republic of Niger and how it unsettled the people in neighbouring northern Nigeria. Section three discusses northern Nigerians' consumption of threat-related reports and updates and the adverse psychological impact it possibly had on them. Section four presents the framework of ATR. Section five situates northern Nigerians' opposition to the ECOWAS' military option in Niger within the ATR framework. Section six discusses the implications and recommendations for helping professionals, and the last section (seven) is the conclusion.

THE MILITARY JUNTA IN NIGER

On the 26th of July, 2023, a coup d'état occurred in the Republic of Niger [8]. The Nigerien presidential guard unseated and detained Mohamed Bazoum, the country's incumbent President. After confirming the success of the coup, the presidential guard commander, General Abdourahamane Tchiani, proclaimed himself the leader of a military junta. In reaction to this development, the Economic Community of West African States (ECOWAS) gave Niger's coup leaders a one-week deadline on July 30, 2023, to reinstate Bazoum or face international sanctions and use of force [9]. This situation was unsettling for the Republic of Niger and its neighbouring country, Nigeria, from where the bulk of ECOWAS' troops was likely to come.

The Republic of Niger shares a border with several States in northern Nigeria, such as Sokoto, Kebbi, Katsina, Zamfara, Jigawa, Yobe, and Borno. Both countries have close ethnic and historical ties that have encouraged cross-border trading and intermarriages between Nigeriens and Nigerians [10]. On August 6, 2023, BBC News highlighted the close connections between citizens of both countries, reporting that almost one in every five residents in several States of northern Nigeria, especially Sokoto State, is from Niger or has connections with Niger [11]. Sokoto, which is home to Nigeria Army's 8 Division, is located near a major junction leading to the Republic of Niger and was likely to be a mustering point for troops before any military action. Given their cross-border connections with Niger and having known the ravages of terrorism and banditry for many years, people in northern Nigeria feared that military intervention by ECOWAS could greatly affect their family members in Niger and even jeopardise their own security in neighbouring Nigeria.

NORTHERN NIGERIANS' CONSUMPTION OF THREAT-RELATED MEDIA REPORTS

As the tension increased between the military junta in Niger and ECOWAS, the public relied heavily on the media to obtain information regarding the implications of the ongoing threats and counter-threats. According to Ball-Rokeach and De Fleur's media dependence theory [12], during a severe social upheaval, individuals have an unusually high need for information and sense-making of the situation, and they generally turn to the mass media to satisfy these needs [13]. One of the reasons people usually need more information in a crisis is to reduce the anxiety caused by uncertainty during a crisis event [14].

Television viewers, social media users, and consumers of other news outlets in Nigeria watched the threats and counter-threats between ECOWAS and the Nigerien military junta for weeks. They heard the predictions about what these actions could mean for their country. Nigerians, especially those in the northern part of the country, listened to the anxious conjectures of media commentators and security

spokespersons about the likelihood of imminent aggression and its substantial impact on their lives. With the pervasive access to news and real-time events from the Internet as well as television and other outlets, people in northern Nigeria witnessed with anxiety a build-up of military resources that might eventually be used to fight a war that could negatively alter their lives forever, including the activation of the ECOWAS standby force and the deployment of warplanes from Mali and Burkina Faso within the borders of neighbouring Niger to respond to any attacks by ECOWAS [15].

As people in northern Nigeria watched the development of an impending war with little or no agency for self-protection and self-defence, it is not unreasonable to speculate that a wide range of reactions to the looming destruction is possible, and these reactions might align with the cognitive, affective, and behavioural responses that characterise negative psychological outcomes. Indeed, several studies have found strong links between disaster-related media exposure and the development of harmful mental conditions such as heightened anxiety [16], [17], fear and depression [18], increased levels of threat perception [19], aggression or stress-related behaviours [20], [21], and post-traumatic stress symptoms [22]. In a meta-analysis by Houston [23], the researcher found a significant association between terrorism-related media exposure and post-traumatic stress symptoms. Similarly, a research synthesis by Pfefferbaum and colleagues [24] showed that correlational studies support the association between disaster-related media exposure and negative outcomes such as post-traumatic stress symptoms, stress responses, fear, and depression. In a much earlier study by Kiser et al. [25] among students who watched warnings of televised news about a predicted earthquake on the New Madrid fault line in the US South in 1990 (which never happened), a significant number of the participants had elevated stress-related symptoms in anticipation of a natural disaster, including sleep disturbance, nightmares, generalised fear, and concerns about the safety of self and loved ones.

In recognition of the consequences of negative news consumption, constructive journalism has arisen as a field that focuses on positive emotions and solution-based reporting [26]. This approach, according to McIntyre and Gyldensted [27], “involves applying positive psychology techniques to news processes and production in an effort to create productive and engaging coverage while holding true to journalism’s core functions” (p. 23). For instance, instead of increasing the people’s perception of impending danger by using techniques such as the rolling coverage of the threats and counter-threats between ECOWAS and the Nigerien military junta, constructive journalism would focus on featuring previous incidences of a similar nature where diplomatic or political solutions had worked. In other words, constructive journalism involves presenting a complete narrative and showing a positive end to a story. During the COVID-19 pandemic, Giri and Maurya [28] explored the effect of pandemic-related news on an individual’s emotions and resilience. The results showed that the participants’ positive emotions were significantly higher for those who were exposed to news with positive content about the pandemic than those who were exposed to negative content about the same. It was also found that negative emotions were significantly higher for those exposed to pessimistic news than for those exposed to neutral non-COVID-19 news. Thus, constructive journalism can reduce the adverse psychological impact of a threatening situation like that experienced by people living in northern Nigeria.

Unfortunately, while traditional news outlets may edit and regulate what news items are reported to the public, the largely unregulated social media space makes the approach of constructive journalism impossible because it allows anyone to contribute and share their opinions about a news cycle [29], even when such contributions are potentially dangerous. In the context of large-scale traumatic events, anxiety and stress-eliciting messages are expressed in online communities, and such messages potentially increase adverse psychological feelings. As a result, social media may create a contagion phenomenon in which negative emotions are spread through its various networks [30].

ANTICIPATORY TRAUMATIC REACTION

ATR is defined as a form of future-focused distress evoked by media reports and social discussions of large-scale negative events or threats, such as disasters, acts of terrorism, and wars. This form of distress is rooted in uncertainty and the fear of future events and comprises feelings of stress, vulnerability, anger, or a need to protect and defend [7]. Given the ubiquity of threat-related media content together with numerous studies linking media exposure and adverse psychological effects, and because the types of symptoms identified in the literature cannot be attributed to PTSD (according to the parameters of the DSM-5), ATR was conceptualised as a construct to account for the mechanism by which negative reactions arise in individuals from media exposure to trauma.

Unlike PTSD, which is triggered by direct exposure to an adverse event or exposure to someone directly impacted by trauma [1], [31], ATR involves future-focused anxiety due to concern that events like those reported by the media may be personally experienced in the future. Hopwood et al. [7] explored this novel construct in two studies with a total of over 700 community participants. They found higher levels of traumatic reactions to be significantly associated with both anxiety and depression. However, the traumatic reactions were also found to have a distinct variance from anxiety and depression. Thus, just as symptoms of panic disorder may be related to anxiety but also present a distinct profile, ATR is related to anxiety and depression and presents a distinct form of distress. ATR includes maladaptive feelings and thoughts about reduced safety and security for self and others. It may evoke a need to prepare for future trauma, manifesting as forms of mental rehearsal (or imaginings), warning others, seeking further information about the feared event, or taking concrete actions such as stockpiling emergency supplies or mobilising resources for defending self and others [7].

ATR AND NORTHERN NIGERIANS' OUTCRY AGAINST ECOWAS' MILITARY OPTION IN NIGER

ATR, as conceptualised, provides an explanatory scaffold for comprehending the reactions of northern Nigerians to the media reports about ECOWAS' military option in Niger. Anxious about the safety of themselves, their families, and other close acquaintances across the border, several individuals and groups in northern Nigeria, including the Coalition of Northern Groups (CNG), heatedly opposed any form of military action against neighbouring Niger. While condemning the military junta and calling on the coup leaders to embrace diplomatic, peaceful, and bloodless options to resolve the issue, the CNG noted that Niger is a country that borders Nigeria to the north and shares ethnic, cultural, and linguistic affinities with Nigeria, such that a military option in Niger will have serious security implications for Nigeria, especially for people living in the northern part of the country [32]. This reaction, which was driven by future-focused anxiety and perceived vulnerability, not only falls within the scope of ATR but is also consistent with Ronald Rogers' protection motivation theory [33], which provided a foundation for conceptualising ATR. The Protection motivation theory explains how media reports of negative events may communicate a sense of threat, generate anxiety, and promote a need to protect and defend oneself or others [34]. Specifically, this theory clarifies how media reports and the subsequent discussions of impending armed conflict in Niger could have evoked emotions, impacted levels of threat perception, and incited protective or preparatory thoughts or behaviours among northern Nigerians.

Additionally, northern Nigerians' anxiety over media reports of possible military conflict in neighbouring Niger was arguably related to past traumatic exposures, which can also predict ATR experiences. Hopwood and Schutte [35] conducted a meta-analysis of studies that examined psychological outcomes in reaction to media exposure to disasters and large-scale violence. The researchers found that studies conducted in communities (like those in northern Nigeria) that had previously been impacted by traumatic events, like

those portrayed in the media, reported larger effect sizes for negative outcomes than studies from other communities. Northern Nigeria has been, for decades, a hotbed of extensive violence perpetrated by several terrorist groups, including Boko Haram, Islamic State in the Greater Sahara (ISGS), Jama'at Nusrat al Islam wal Muslimin (JNIM), Al Qaida in the Islamic Maghreb, the Islamic State in West Africa Province (ISWAP), and the Fulani herdsmen of West Africa [36]. As a result of the devastation caused by extreme terrorist attacks, many Nigerians in this region have witnessed acute humanitarian and forced displacement crises, with distressing social, economic, and emotional impacts on the population. Therefore, within the framework of ATR, it is understandable that media reports and discussions about imminent armed conflict could have triggered memories of previous exposures to large-scale violence and likely heightened northern Nigerians' anxiety about what could happen again in the region.

IMPLICATIONS AND RECOMMENDATIONS FOR HELPING PROFESSIONALS

Given the association of ATR and post-traumatic stress symptoms, the types of psychological treatments that have been empirically shown to reduce symptoms of anxiety, PTSD, and mood disorders should provide a direction for helping individuals and communities experiencing ATR. Hopwood et al. [34] explored the efficacy of several approaches to ameliorating the experience of ATR, including distraction, mindfulness, cognitive reframing, probability correction, intentional optimism about the future, and focusing on the positive, all of which are helpful in treating PTSD. In a sample of adult men and women, Hopwood et al. found that mindfulness and probability correction showed the most significant results for reducing the levels of ATR. Mindfulness invites individuals to focus on the present moment in a non-judgmental manner, and it has been shown to reduce intrusive and ruminative thought, arousal, anxiety, and depression that may develop in people experiencing ATR [37]. Probability correction invites individuals to counter catastrophic thinking and consider the low likelihood that the threatening situation would affect them. Given the northern Nigerians' situation, probability correction would help them to realistically assess their risks beyond the threat reported in the media by considering the potential success of the ongoing high-powered negotiations and the pushback against ECOWAS' military option by other members of the international community, especially the leaders of the African Union. Thus, interventions focused on mindfulness and the correction of probability neglect may be effective in attenuating levels of ATR, and these interventions may be equally effective regardless of people's risk factors.

Because ATR recognises the potential for PTSD outcomes before the trauma has occurred and recognises that some PTSD outcomes may result simply from the expectation of the trauma occurrence [34], helping professionals are in the position to lessen the impact of perceived threats of danger by using similar intentional strategies that are effective in fostering resilience and countering feelings of powerlessness. Recognising ATR symptoms and integrating them into therapy approaches and strategies for helping individuals deal with these symptoms may be useful. It is also possible that ATR exacerbates existing psychological conditions such as PTSD, generalised anxiety, and major depression. So, it could be beneficial for helping professionals to examine the presence of such underlying conditions and identify individual differences that may act as buffering factors for ATR. Clinicians may also recommend reducing watching television reports of threats and disasters to reduce the likelihood of mental health problems associated with ATR.

In addition to interventions for helping individuals who experience ATR, a discussion of northern Nigerians' exposure and reaction to threat-related media calls for some trauma-healing interventions at the community level. While practitioners recognise the high prevalence of trauma across entire communities, most approaches to address trauma are focused on treating individuals. Commenting on the need for a community-level approach, Albee [38] observed that we cannot resolve a pandemic by focusing only on the affected individual's treatment. While treatment of individual trauma has advanced through the development of various treatment modalities and approaches for addressing the psychological and emotional effects of

exposure to violence, there has been limited advancement in the development of strategies for addressing community trauma. The absence of effective community-focused interventions may result in societal costs, including reduced community morale, a deficit of hope, and an increased prevalence of mental illness.

Considering the exposure of northern Nigerians to trauma, the concept of collective trauma seems to apply either as an aggregate of the trauma they experienced as a community or an experience that impacted a few people but had social traumatic consequences [39]. Given the media reports and discussions of the impending war, northern Nigerians likely had a collective feeling of being exposed to a horrendous event that would leave indelible marks upon them and negatively alter their lives in fundamental and irreversible ways. Thus, it could be beneficial to see their experience as ATR at a community level, which should require community-level interventions to deal with their trauma collectively [40]. Such interventions could help the communities cope and build resilience.

CONCLUSION

Using the ATR framework, this paper discussed the collective reaction of northern Nigerians to media reports and discussions of imminent armed conflict in neighbouring Niger after the July 26, 2023 coup d'état occurred in the country. The paper offered insight into how such a reaction could be motivated by future-focused fears and anxiety, as well as memories of past traumas. The omnipresence of media reporting and online discussions of the global increase in terrorism, political unrest, and economic uncertainty means that threats may be represented in ways that cause an overestimation of risk for adverse events, leading to an increase in the prevalence of ATR. Thus, modern advancement in communication technology is not only a marker of progress but also risks undermining people's resilience and resistance to mental health disturbances, dysfunctions, and decompensations. Therefore, ethically motivated constructive journalism must be sensitively balanced with productive and engaging rolling coverage of real-time threat-related events to prevent traumatization through media exposure to large-scale threats. Finally, given the symptoms of ATR that further highlight the limitations of the DSM-5 in capturing the complexities of trauma, the diagnostic manual, rather than being taken as a definitive source of information, should be used as a guide for clinical practice, especially among individuals and groups whose presenting symptoms fall outside the definitions of the DSM-5. More so, continuous research is necessary to expand the toolkit of clinical psychology to mitigate and treat this subclinical phenomenon among individuals and communities.

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