

Prevalence of Armed Conflict Exposure and Lived Experiences among Students in Catholic Secondary Schools in Bamenda III, Cameroon

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ABSTRACT

The armed conflict in Cameroon's English-speaking regions has deeply affected students in Bamenda III, causing significant psycho-social challenges. This study examined armed conflict exposure and psycho-social well-being among Catholic secondary school students in Bamenda III. The objective was to assess the prevalence of armed conflict exposure, guided by stress process theory by Leonard Pearlin and psychological well-being theory by Carol Ryff. The study employed an embedded mixed methods design. The target population was 2,600 Catholic secondary students in Bamenda III where 335 students were sampled. Multi-stage sampling was used to obtain the participants. Data was collected using structured questionnaire and interviews were conducted among participants. Quantitative data were analyzed using descriptive statistics while qualitative data were analyzed using Interpretative Phenomenological Analysis. The findings shows that over 70% of Catholic secondary school students in Bamenda III have experienced some form of armed conflict-related trauma, with 41.7% showing moderate to severe exposure levels. Based on these findings, the stakeholders—including the Ministry of Education, schools, parents, Non-governmental Organizations (NGOs), faith institutions, local leaders, universities, and global donors—should collaboratively implement and support a national trauma-informed education policy featuring mental health training, psychosocial support programmes, community engagement, research, and inclusive funding in conflict-affected areas.

Key words: Armed conflict, students, catholic secondary school.

BACKGROUND TO THE STUDY

Armed conflict continues to exert devastating impacts on civilian populations worldwide, with children and adolescents emerging as particularly vulnerable to its psycho-social consequences. Global studies—including those by Adhvaryu and Fenske (2023), de Moor and Wesseling (2023), and Kepe et al. (2023)—underscore that the psychological toll of conflict exposure often surpasses physical harm, especially in disrupting mental health, educational continuity, and family cohesion. Displacement and direct exposure to violence significantly elevate risks of Post-Traumatic Stress Disorder (PTSD), depression, and anxiety in children (Betancourt et al., 2013; Fazel et al., 2012). Across several major humanitarian crises—such as Ukraine (Roberts et al., 2023; 2022, UNICEF, 2022b), Yemen (El-Khodary & Samara, 2025; Veronese et al., 2021), and Gaza (Charlson, van Ommeren, & Flaxman, 2023)—students report high levels of traumatic stress and diminished academic engagement due to persistent insecurity, displacement, and lack of educational infrastructure. Similarly, adolescents who have experienced armed conflict in Africa have been found to suffer from chronic trauma among other challenges. For example, adolescents from South Sudan and the Democratic Republic of Congo (DRC) have endured chronic trauma, with a strong correlation between conflict exposure and poor psycho-social well-being (Jordans et al., 2021; Mels et al., 2019; Stark et al., 2018; Vinck et al., 2022).

Apart from the psychological challenges, these adolescents' lives are disrupted in different ways. In Cameroon, the Anglophone crisis since 2016 has triggered large-scale educational disruption, particularly in the Northwest and Southwest regions (Awason et al., 2021; Mbih, 2022). Catholic schools have been directly affected through abductions and school closures (Ayuli, 2021), leaving nearly 600,000 children out of school by 2019

(UNHCR, 2020). This mirrors patterns in other conflict zones where school destruction, fear of attacks, and lack of educators impede both academic and emotional development (Rahimi & Tesfay, 2022; UNESCO, 2022). Studies have shown that PTSD prevalence among youth in war settings ranges from 22% to as high as 70% (Charlson et al., 2019; Morina et al., 2018). In terms of the adolescents' behavioral outcomes vary, some students manifest internalizing distress (e.g., withdrawal, sadness), while others exhibit externalizing symptoms such as aggression or hypervigilance (Panter-Brick et al., 2021; Thabet & Vostanis, 2021). In Cameroon, such manifestations are evidenced through reports of rising delinquency and substance misuse among youth (Mbih, 2022), suggesting complex and multidimensional psychological burdens.

Despite these challenges, many conflict-affected adolescents display remarkable resilience shaped by familial, religious, and community supports (Betancourt & Khan, 2008; Panter-Brick et al., 2018). They have also developed various coping mechanisms such as avoidance strategies (Jordans et al., 2021; WHO, 2019) to positive reframing and spiritual devotion (Ayuli, 2021; Panter-Brick et al., 2021). In other contexts they have used outlets such as creative practices to deal with psychological challenges that result from exposure to armed conflict. For example, in Gaza and the DRC, students use art and journaling to process trauma (Mels et al., 2019), while Ukrainian youth draw strength from family ties and volunteerism (Braun-Lewensohn et al., 2023). However, without professional mental health interventions, prolonged use of maladaptive coping strategies may lead to chronic distress (Charlson et al., 2019; Betancourt et al., 2020). This article focuses on highlighting the prevalence of youth exposed to armed conflict in Bameda III, Cameroon which may assist in showing the need for psychosocial services among this population. Additionally, this study thus contributes by exploring Catholic secondary school students' subjective experiences within Cameroon's Anglophone armed conflict, identifying resilience strategies and informing culturally grounded interventions that support student recovery and long-term flourishing.

LITERATURE REVIEW

Prevalence of Armed Conflict Exposure Among Secondary School Students

Amid growing global concern about the effects of armed conflict on learners' mental health, Dar and Deb (2020) conducted a cross-sectional survey of 693 university students in Kashmir. Using a Semi-Structured Questionnaire and the Mental Health Inventory (MHI-18), they found significantly higher anxiety and depression among male students, those from low-income families, rural residents, and youth whose mothers had limited education. A third of participants attributed much of their distress to the ongoing conflict, compounded by family tensions. In another study by, it was found that prolonged conflict also exerts severe developmental impacts on children in their regions of origin. Khan (2022) reported that Kashmiri youth exposed to political upheaval, violence, and communication blackouts faced elevated risks of anxiety, depression, and post-traumatic stress disorder (PTSD). Disruptions in schooling curtailed cognitive growth and jeopardized future prospects. Khan underscored an urgent need for integrated counselling and trauma-informed educational strategies, particularly after the abrogation of Article 370 restricted access to educational and psychological services. While these studies offer insights into mental health burdens of the children and youth in Kashmir, they did not consider the in-school adolescents especially those in faith based secondary institutions. This is because the adolescents in faith based institutions are in a different environment considering the role of religious identity, teacher influence and/or moral instruction. These may have a unique impact in their psychosocial lives, thus there was need to conduct this study on the prevalence of the exposure to armed conflict and their experiences in this environment.

International resettlement programmes often view schools as key spaces for psycho-social support. In a participatory study, Stark et al. (2021) engaged recently resettled high-school students from the Middle East and North Africa in the United States of America. Thematic analysis highlighted urgent needs for social and academic coping strategies, culturally responsive teaching, and equitable learning climates. The authors advocated a transformative social-emotional-learning (SEL) approach tailored to migrant students' cultural and linguistic realities to foster resilience, peer support, and stronger academic outcomes. This participatory study contributes important findings about refugee students adapting to post-migration life in the U.S.A., but it fails to examine youth who remain in situ amidst ongoing violence. It also does not consider the faith-based school environment, where coping strategies, identity formation, and resilience may differ from secular institutions.

As a result, the specific challenges faced by adolescents in religious schools under live-conflict conditions are left unaddressed.

Accurate measurement of political-violence exposure remains challenging. Slone and Shoshani (2022) introduced the Political Life Events Scale for Youth (PLE-Y), which captures both the intensity of violence and adolescents' subjective interpretations. Higher PLE-Y scores correlated strongly with psychiatric symptoms and behavioural maladjustments, demonstrating the destabilising effects of chronic insecurity. The authors emphasised that precise exposure assessments are vital for tailoring mental-health interventions and informing policy.

Their introduction of the Political Life Events Scale for Youth (PLE-Y) represents methodological innovation in measuring conflict exposure, yet the instrument has not been validated or applied in African contexts or within Catholic or denominational schools. Moreover, their work does not link exposure scores to day-to-day school functioning, curriculum engagement, or educator responses, leaving a gap in application within real educational environments.

Large-scale intervention studies reveal both promise and complexity. Raslan et al. (2021) examined psycho-social support programmes for conflict-affected children across several countries, finding that 73.7 % showed probable mental-health issues. Although 63.6 % improved after targeted support, 14.4 % deteriorated and 22.1 % discontinued treatment, underscoring the challenges of achieving sustainable outcomes in unstable environments. The authors advocated integrative approaches combining educational assistance, economic empowerment, and family-based strategies.

While their multi-country study reveals high prevalence of mental health issues among conflict-affected children, it does not explore faith-based or school-led psycho-social services. The study offers broad recommendations for integration of support services but lacks practical examples of how educational institutions, particularly religious ones, can operationalize these interventions effectively on the ground.

A socio-ecological view of resilience is essential, as argued by Slone and Peer (2021). Their model situates youth adaptation within nested systems—from family and school to community and governance—and highlights how systemic factors such as stable institutions and culturally attuned services shape children's capacity to thrive. They called for cross-sector collaboration and policy reforms that weave support into daily life rather than isolating it within clinical settings.

The authors offer a compelling socio-ecological model for understanding resilience in conflict zones, but their framework is theoretical, with minimal empirical testing in African faith-based school settings. They also do not investigate how religious rituals, school-parish cooperation, or clergy counselling contribute to the “social climate of support” they advocate, which represents a significant empirical omission.

Health facilities often serve as frontline responders during endemic violence. Analyzing International Committee of the Red Cross (ICRC) mental-health initiatives across six African countries, Andersen et al. (2020) found symptom-reduction rates exceeding 90 % on standardized scales. Nonetheless, outcomes varied with factors such as financial insecurity, experiences of sexual violence, and early-intervention timing, prompting calls for holistic strategies that integrate economic and community resources.

Their study shows robust outcomes from clinic-based MHPSS programmes led by the ICRC, but it does not address how such clinical gains can be translated into educational settings—especially those facing resource shortages, staff trauma, and interrupted routines. No insights are provided into how mental health strategies might be adapted to daily life in conflict-affected Catholic schools, where structured medical services may be absent.

Urban multicultural settings present additional layers of complexity. Seff et al. (2021) compared Middle Eastern and North African adolescents in Detroit, finding no overall psycho-social differences between foreign- and U.S.-born students but noting a gender-specific decline in resilience among foreign-born boys. Qualitative findings showed that cultural enclaves can simultaneously protect and stress adolescents, leading the authors to recommend culturally tailored SEL curricula and mentorship programmes. Although this study

effectively analyses the cultural pressures faced by migrant youth in U.S. urban schools, it lacks insight into students living amid active armed conflict, and provides no data from Africa or religious institutions. Additionally, it does not address the potential of spiritual or pastoral support systems to shape resilience in contexts where religious identity is central to community life.

Persistent warfare's psychological toll is evident in Syria. Studying secondary-school students in Damascus, Kakaje et al. (2022) identified strong links between war exposure, anger, and PTSD, though academic performance remained largely unaffected. Employment outside the home reduced PTSD levels yet harmed physical well-being, illustrating complex trade-offs. The authors called for integrated interventions that address trauma, socioeconomic constraints, and community cohesion. In addition, this study indicates that academic performance were unaffected possibly because the adolescents in Syria were born and have grown within the armed conflict period and therefore they may have developed high levels of academic resilience. The adolescents in Bamenda III, Cameroon were born in a period of relative peace until the armed conflict began. Therefore there was need to establish the level of armed conflict exposure and their experiences during this period in terms of their psychosocial lives.

In Pakistan and Latin America, students have drug-related political and terrorist violence. In both of these regions, the students developed various mental health challenges such as anxiety, depression and PTSD. In addition they were found to experience difficulties in concentrating in school (Aziz & Yousaf, 2022; Martínez & Muñoz, 2021) probably due to heightened anxiety and being extra vigilant in light of the violent attacks. In both of these contexts, the students lived within tight knit communities that were grounded in social ties, and participated in communal and religious ceremonies. However, the students seem to have suffered from mental health challenges. This could be an indicator that armed conflict may affect students regardless of the communal intergration as well as religious participation. This marks the need for more studies within such contexts. Bamenda III in Cameroon is one of such contexts where the society is generally collectivist and the schools chosen in this study participate in religion.

Residual tensions persist in parts of post-conflict Europe. Surveying students in Bosnia and Herzegovina, Croatia, and Serbia. Petrović et al. (2020) found that depressive symptoms and social withdrawal remained prevalent where nationalist rhetoric was strong. Peer-led dialogues and multicultural events reduced interethnic distrust, leading the authors to recommend institutionalized peace-education programmes. Researching post-conflict Europe, the authors document lingering psycho-social effects of nationalism and ethnic division, and promote peer dialogue and peace education. Yet their study focuses on post-war rather than ongoing-conflict contexts, and does not explore the role of faith-based schooling, religious reconciliation, or spiritual leadership in promoting recovery among students who live amid continued hostilities.

There are few studies that have been conducted in Africa within areas experiencing armed conflict. For example, research in Kenya's West Pokot region by Ronoh and Mwoma (2020) showed that insecurity heightened fear and hindered concentration among preschoolers, despite community-led safety initiatives. The authors urged incorporating psycho-social support into early-childhood curricula to address trauma from an early age. Focusing on preschool learners in Kenya's West Pokot region, their study provides evidence of early trauma but neglects older students in secondary education, whose exposure to violence intersects with adolescence, identity formation, and academic pressure. Additionally, the role of faith-based school environments in moderating trauma remains unexplored.

In another study conducted by Nabunya et al. (2020) demonstrated that structured school activities and teacher mentorship in Northern Uganda correlated with lower depression and anxiety among conflict-affected youth, especially those displaced or separated from family. However, resource constraints and absenteeism threatened sustainability, highlighting the need for coordinated efforts and long-term funding. This Ugandan study links teacher mentorship and structured school routines to improved youth mental health, but it does not address the dual burden of trauma on teachers and students in Catholic schools, nor the faith-sensitive dimensions of mentoring and emotional care. The study also stops short of discussing how religious identity or spiritual practice may influence help-seeking and resilience.

A close examination of these studies reveals both methodological strengths and persistent blind spots. Many researchers employ cross-sectional surveys—such as Dar and Deb's (2020) work in Kashmir and Nabunya et

al.'s (2020) study in Northern Uganda—to capture prevalence rates of anxiety, depression, or PTSD at a single point in time. While such designs are efficient for quantifying mental-health burdens, they offer limited insight into how symptoms evolve as conflict exposure waxes or wanes. Furthermore, reliance on self-report instruments may inflate symptom prevalence if participants interpret questions differently across cultural contexts. These measurement inconsistencies underscore the need for harmonised tools that blend subjective interpretation scales like the PLE-Y with validated symptom inventories. The current study focuses on finding out the prevalence of students exposed to armed conflict in Bamenda II in Cameroon while also it establishes their lived experience in terms of their psychosocial well-being using a mixed method design. It provides data on in-school students within religious based institutions.

Finally, although Slone and Peer's (2021) socio-ecological model compellingly situates youth well-being within nested systems—from family to governance—empirical tests of this framework are fragmentary. Few multi-country studies integrate measures across these layers, and almost none assess how interventions at one level (for example, community reconciliation efforts) interact with supports at another (such as school counselling). Addressing these contradictions and gaps will require longitudinal, multi-level research designs, standardised yet culturally sensitive measurement tools, and careful unpacking of programme components—precisely the aims of our proposed study.

METHODOLOGY

Research design

In this study, an embedded mixed methods design was employed, integrating qualitative and quantitative approaches in a manner where the quantitative data took precedence and the qualitative data provided a supportive, secondary role to ensure a comprehensive understanding of the research problem (Creswell & Plano Clark, 2018).

An embedded mixed methods design was particularly suitable for this study, given the limited discussion regarding the specific sample or group under investigation (Creswell & Plano Clark, 2018). By collecting both quantitative and qualitative data simultaneously, the research captured statistical patterns while simultaneously exploring participants' lived experiences. The quantitative component involved administering a survey to obtain numerical data, thus enabling the identification of broad trends and facilitating generalizable conclusions. Incorporating qualitative data collection concurrently within this quantitative framework ensured that emerging patterns and relationships were identified early, allowing for ongoing insights as the research progressed.

The qualitative component involved Interpretative Phenomenological Analysis (IPA), a method that examined the personal experiences and perceptions of participants (Smith et al., 2009). In-depth interviews were conducted using open-ended questions to elicit rich, detailed narratives. By embedding this qualitative inquiry concurrently within the quantitative framework, with quantitative data taking precedence, the study promptly integrated participant perspectives into the broader analytical context.

This approach allowed themes and issues to emerge in real time, ensuring that both data sets were meaningfully aligned and interpreted collectively. Through integrated data collection and analysis, the final report presented an integrated set of findings that underscored the complexities of participants' experiences, aligning quantitative trends with qualitative themes (Creswell and Plano Clark, 2018) Creswell & Plano Clark, (2018). This embedded mixed methods design, with quantitative methods taking precedence and qualitative data supporting, not only provided a contextualized understanding of the sample, but also strengthened the generalizability and depth of the findings.

Location of the study

Bamenda III is part of the western Cameroon's Anglophone regions where ongoing conflict between government forces and separatists has created a pervasive atmosphere of fear and insecurity, manifesting in frequent kidnappings and a collapse of the education system in rural areas, contributing to an environment where children are often victims of violence and are forced to refrain from wearing school uniforms outside

their classrooms for fear of abduction. Schools have been closed for years in many rural areas due to separatist threats, depriving an entire generation of formal learning, and leaving communities to rely on makeshift educational programs like youth centers (Kriesch, 2021).

Target Population

The research encompassed students attending Catholic Secondary schools in the Bamenda III municipality which had an enrollment of 2600 students (specifically Form 1 - 5 students). This focus was predicated on findings suggesting that children and adolescents were particularly vulnerable to the psychological toll of armed conflict-related traumatic events (Jordans et al., 2016 Khan, 2022).

Sample size

The three Catholic secondary schools in Bamenda III—St. Joseph Calasanz, All Saints Day College, and St. Paul's College - have a total of 2,600 students comprising 1,005 boys and 1,595 girls. This population frame enabled accurate application of Cohen's (1988) formula for sample size determination, using a 95% confidence level ($Z = 1.96$), a conservative population proportion ($p = 0.5$), and a 5% margin of error ($E = 0.05$), yielding an initial sample estimate of 384.16. The Finite Population Correction (FPC) was appropriately applied, refining the sample size to 335 students to account for the relatively small, finite population.

The sampling procedures were methodologically rigorous, employing stratified random sampling by school and gender, proportional allocation, class-level proportionate sampling, and simple random sampling within each class. These multi-layered sampling techniques ensured demographic and institutional representativeness.

Table 1 explains the simple random sampling within classes among the students of catholic secondary schools in Bamenda III.

Table 1: Simple Random Sampling Within Classes

| School | Form 1 | Form 2 | Form 3 | Form 4 | Form 5 | Total (B/G) |
|-------------------------------|--------|--------|--------|--------|--------|----------------------|
| St Joseph Calasanz Menteth | 7/14 | 8/12 | 8/14 | 9/10 | 7/10 | 39/60 (99) |
| St Paul's College Nkwen | 9/20 | 9/14 | 11/17 | 11/13 | 13/20 | 53/84 (137) |
| All Saint Day College Bayelle | 8/14 | 10/16 | 8/10 | 6/11 | 6/10 | 38/61 (99) |
| Grand Total | | | | | | 130/205 (335) |

In Table 1, each Form column (Forms 1–5) lists the allocated sample per gender as Boys/Girls. The “Total (B/G)” column sums boys and girls for each school and gives the school's overall sample in parentheses—St Joseph Calasanz Menteth: 39/60 (99); St Paul's College Nkwen: 53/84 (137); All Saint Day College Bayelle: 38/61 (99). The “Grand Total” aggregates all schools, showing 130 boys and 205 girls, for a combined sample of 335.

The study further integrated a qualitative sub-sample of 26 interview participants, totaling 361 participants. This dual-sample design aligned with mixed methods principles, balancing generalizability from the quantitative survey with depth and nuance from qualitative interviews.

The following sampling matrix illustrates the distribution of participants across the quantitative and qualitative components of the study:

Table 2 presents the sampling matrix for all participants in the study.

Table 2: Sample Matrix for All Participants in the Study

| Participant Group | Questionnaire | Interview | Total Participants |
|-------------------|---------------|-----------|--------------------|
| Students | 335 | 13 | 348 |
| Teachers | - | 6 | 6 |
| Parents | - | 7 | 7 |
| Totals | 335 | 26 | 361 |

Regarding the research instruments, the study employed a structured questionnaire and interview guides. The questionnaire was rooted in validated psychometric tools, notably the Harvard Trauma Questionnaire developed by Hollifield et al. (2005), which captured both direct and indirect exposure to war-related trauma. The study adapted and applied the scoring section of this inventory—comprising 49 items—to assess trauma severity quantitatively.

Reliability and Validity

Reliability and validity were crucial qualities in evaluating research instruments. In this study, reliability was assessed through several strategies. For the standardized questionnaire, internal consistency was evaluated using statistical measures such as Cronbach's alpha to ensure that items within each section reliably measured the same construct.

Table 3 presents the reliability statistics for the armed conflict exposure.

Table 3: Reliability Statistics for Armed conflict exposure

| Reliability Statistics for Armed conflict exposure | |
|--|------------|
| Cronbach's Alpha | N of Items |
| .909 | 11 |

Table 3 contain the statistics which has confirmed a roughly normal distribution of total wellbeing scores and no extreme floor or ceiling effects. Internal consistency was excellent ($\alpha = 0.909$), indicating the eleven items cohere very closely around a single general wellbeing construct. general wellbeing factor without substantial cross-loadings

Data Collection Procedures

The study's data collection strategy was methodical and ethically grounded. It began with obtaining official authorization from the Psycho-Spiritual Institute (PSI), the Divisional Delegate for Secondary Education in Mezam, and the heads of the three Catholic schools in Bamenda III. These administrative steps reflect careful attention to institutional protocols, ensuring the research was both legitimate and collaborative.

Data Analysis Procedures

The data analysis aligned with the embedded mixed-methods design by treating both qualitative and quantitative data streams as complementary. Quantitatively, data from the structured student questionnaires were analyzed using SPSS. Descriptive statistics (e.g., frequencies, percentages, means) provided insights into students' background characteristics and armed conflict trauma exposure. Prior to statistical analysis, scores from the Hollifield trauma inventory were assessed for internal consistency using Cronbach's alpha, and both

exploratory and confirmatory factor analyses were conducted to validate scale structure. The integration of qualitative and quantitative findings occurred during interpretation, with qualitative themes used to enrich statistical results, and vice versa, reflecting the epistemological strengths of mixed methods research.

On the qualitative side, the analysis was rooted in phenomenological methodology. Audio-recorded interviews were transcribed, allowing for deep immersion into the data through repeated readings. Significant statements were identified, coded, and transformed into meaning units, which were then clustered into overarching themes. This process highlighted both commonalities and individual variations in student experiences of conflict, in line with phenomenological principles. The narrative presentation of findings preserved the authenticity and emotional texture of participants' voices, giving depth and meaning to the broader patterns observed.

Ethical Considerations

The study followed internationally recognised ethical standards by briefing participants on aims, benefits, and risks, securing written informed consent—and, for minors, both parental/guardian consent and the child's assent—while emphasising the unconditional right to withdraw at any stage, with any associated data deleted upon request. Confidentiality and anonymity were safeguarded through the use of unique identifiers, anonymised transcripts and reports, and strict data-security measures: encrypted digital files and locked physical storage accessible only to the researcher and authorised personnel, all of whom had completed ethics training and signed confidentiality agreements. Throughout data collection, interviews were conducted with sensitivity; sessions could be paused if distress arose, and participants were offered referral to professional support, embodying the principle of non-maleficence. Transparency was maintained from recruitment to reporting—participants were kept informed of procedures and any amendments, and results were presented solely in aggregate form—thereby reinforcing trust, protecting privacy, and underpinning the study's validity, integrity, and credibility.

Demographic Characteristics of Participants

Among the 335 surveyed students, most (53.7%) were aged 14–16, with 35.5% between 10–13 and 10.8% 17 years or older (outliers ranged from 10 to 24), situating participants in Piaget's formal-operational or late concrete-operational stages—sensitive to trauma yet open to resilience-building. Class levels were fairly distributed, with Form Five (23.8%) largest, followed by Forms Three (20.0%), Two (20.5%), One (20.2%), and Four (13.6%), enabling analysis across academic pressures. Females made up 61.2% of the sample, reflecting enrolment trends and signalling the need to consider gendered trauma responses. Through Bronfenbrenner's ecological systems theory, delayed progression and interrupted schooling highlight mesosystem and ecosystem stresses that shape both vulnerability and coping strategies.

Caregiver interviews (four men, three women, aged 50–60) revealed large households, repeated displacement, and fragile livelihoods (teaching, farming, trades, counselling) in conflict zones, where curfews and raids heightened children's hypervigilance and cognitive overload. Teachers (ages 33–65, with 9–38 years of experience) provided generational perspectives: senior staff offered institutional memory, younger staff identified emerging challenges, and all carried dual burdens of personal trauma and classroom caregiving—exposing a policy gap in teacher support.

The 13 interviewed students (ages 12–20; seven girls, six boys) lived in volatile neighbourhoods where proximity to violence disrupted sleep and school attendance. Developmental diversity, spanning early adolescence to emerging adulthood, produced varied cognitive and emotional responses, with girls facing risks of sexual exploitation and boys pressured toward militarization. These intersecting factors—age, gender,

residence, and exposure—formed a vulnerability matrix that underscored the urgency of tailored interventions. Effective support must therefore be decentralized, developmentally staged, and gender-responsive, with a focus on restoring educational continuity and promoting mental well-being in conflict-affected communities.

The Prevalence of Armed Conflict Exposure Among Catholic Secondary School Students in Bamenda III, Cameroon

This section presents a comprehensive analysis of the prevalence of armed conflict exposure among Catholic secondary school students in Bamenda III, Cameroon. The findings are drawn from quantitative survey data using the Conflict Trauma Inventory (CTI) and qualitative interviews with students, teachers, and parents, providing a multi-dimensional picture of trauma and distress in armed conflict-affected context.

Table 4 presents the analysis of the prevalence of armed conflict exposure among students.

Table 4 :Prevalence of Armed Conflict Exposure Among Students

| Category | No, Did Not Happen (%) | Yes, it did happen: Little Fear or Threat (%) | Yes, it did happen: Moderate Fear or Threat (%) | Yes, it did happen: A Lot of Fear or Threat (%) | Yes, it did happen: Extreme Fear or Threat (%) | Total (N) |
|--|------------------------|---|---|---|--|-----------|
| Betrayal | 83.2 | 9.9 | 6.0 | 0.0 | 0.9 | 333 |
| Deprivation | 44.7 | 29.7 | 15.6 | 3.6 | 6.3 | 333 |
| Detention, kidnapping, abduction International Abuse | 61.1 | 27.8 | 8.1 | 3.0 | 0.0 | 334 |
| Difficulty During Migration | 65.0 | 18.7 | 3.9 | 4.8 | 7.6 | 331 |
| Displacement, disruptions of community education and | 57.7 | 16.2 | 6.6 | 6.9 | 11.7 | 333 |
| Domestic discord and violence | 57.4 | 25.5 | 11.7 | 2.7 | 2.7 | 333 |
| Deaths, hearing about death and injury | 5.7 | 36.5 | 20.7 | 20.7 | 16.2 | 334 |
| Physical injury | 87.0 | 6.4 | 0.9 | 2.7 | 3.0 | 330 |
| Psychological injury | 48.2 | 41.0 | 7.8 | 3.0 | 0.0 | 334 |
| Separation and isolation | 55.6 | 26.1 | 7.8 | 6.6 | 3.9 | 333 |
| Witnessing Abuse | 25.7 | 43.7 | 21.3 | 7.5 | 1.8 | 334 |

The above table 4 reveals varying degrees of armed conflict exposure among the students population. The most common exposure was psychological injury, where 41% of the students reported experiencing moderate fear or threat, and another 48.2% indicated no experience of psychological harm. Similarly, witnessing abuse was

highly prevalent, with only 25.7% of Participants reporting no exposure, while the rest acknowledged varying degrees of fear, including 21.3% who experienced moderate fear and 7.5% who endured a lot of fear.

Hearing about death and injury emerged as another significant source of exposure to armed conflict, with only 5.7% indicating they were not exposed, whereas a cumulative 93.6% reported varying levels of fear or distress. This points to the high indirect exposure to violence, which can significantly impair adolescent mental well-being, even without direct contact.

On the other hand, the experience of betrayal—possibly interpreted as acts of treachery or loss of trust—was less prevalent in terms of threat perception, with 83.2% of the Participants reporting no such experience. However, categories such as deprivation (44.7% not exposed) and displacement, disruption of community and education (57.7% not exposed) showed a considerable number of students affected, including extreme fear levels at 6.3% and 11.7%, respectively, which are alarming given the disruptive impact such experiences can have on schooling and psychological stability.

Table 5 provides information on school affiliation and institutional exposure of students in Bamenda III.

Table 5: School Affiliation and Institutional Exposure

| Type of armed conflict exposure | St Paul | St Joseph | All Saints | Highest |
|--|-------------|-------------|-------------|----------------------|
| Betrayal | 1.2 | 1.2 | 1.2 | - |
| Deprivation | 1.8 | 1.8 | 1.9 | All Saints |
| Detention, Kidnapping, abduction and International Abuse | 1.2 | 1.8 | 1.7 | St Joseph |
| Difficulty During Migration | 1.7 | 1 | 1.8 | All Saints |
| Displacement, disruption of community and education | 2 | 1 | 2.1 | All Saints |
| Domestic Discord and Violence | 1.6 | 1 | 1.6 | St Paul & All Saints |
| Deaths, Hearing About Death and Injury | 2.9 | 1.5 | 3 | All Saints |
| Physical Injury | 1.2 | 2 | 1.3 | St Joseph |
| Psychological Injury | 1.7 | 1.4 | 1.7 | St Paul & All saints |
| Separation and Isolation | 1.9 | 1.4 | 1.8 | St Paul |
| Witnessing Abuse | 2.1 | 1.7 | 2.1 | St Paul & All Saints |
| Average | 1.75 | 1.44 | 1.84 | |

Table 5 presents the mean exposure levels to various trauma types among students at St Paul, St Joseph, and All saints schools in Bamenda III. All saints shows the highest overall exposure average (1.84), notably leading in categories such as deprivation, displacement and disruption of community and education, and hearing about death and injury. St Paul follows with an average of 1.75, recording elevated scores in separation, witnessing abuse, and some shared trauma categories with All Saints. St Joseph generally reports the lowest overall exposure (1.44), although it records the highest scores for detention, kidnapping, abductions and physical injury, likely reflecting specific risks unique to that school.

These differences suggest that All Saints students are the most affected by armed conflict-related exposure, with St Paul also significantly impacted. In contrast, St Joseph appears relatively less exposed overall but faces its own trauma risks. These findings highlight the importance of school-specific psychosocial interventions, with a particular focus on All Saints and St Paul, while ensuring that unique vulnerabilities at St Joseph are not overlooked.

Qualitative data support these findings vividly. Teachers from all three schools describe how ghost towns, spontaneous lockdowns, and fear of abduction cripple school functioning. Students suffer from erratic attendance, difficulty concentrating, and chronic anxiety. A teacher from St. Paul shared how a simple loud noise causes students to react with panic—evidence of deep psychological distress. Parents employ coping strategies like games, prayer, and accompanying children to school, but these efforts are insufficient in the absence of professional support. Interviews reveal a grim picture of declining academic performance, emotional instability, and fear of long-term academic failure. Many students have lost loved ones, been displaced, or experienced direct violence.

DISCUSSION

The findings are consistent with global research. Dar and Deb (2020) and Khan (2022) document similar psycho-social disruptions in Kashmir. This study's trauma scale echoes Slone and Shoshani's (2022) call for subjective and objective trauma assessment. However, unlike contexts like Syria (Kakaje et al., 2022), Bamenda students openly seek support from clergy and family, showing strong cultural expression of distress. This study validates both Pearlin's Stress Process Theory and Slone and Peer's ecological model. It confirms that multiple layers of exposure (violence, economic instability, disrupted education) and limited access to support systems combine to generate serious psychological challenges. It also reveals a gap between the strong potential role of schools and their current limited capacity due to under-resourcing and teacher trauma. In conclusion, over 70% of Catholic secondary students in Bamenda III have experienced some level of conflict-related trauma. The psychological, academic, and emotional toll is severe. There is a clear need for context-specific, culturally sensitive, school-based mental health programming that includes teacher training, parent engagement, and professional counselling services.

The lack of formal, structured psycho-social support in Bamenda sharply contrasts with global best practices. Teachers and family members, often overwhelmed themselves, are unable to provide the robust interventions required. This is unlike the positive school-based interventions reported in Andersen et al. (2020) and Nabunya et al. (2020).

Spirituality emerged as a unique strength in Bamenda. Students consistently reported turning to priests and family members, suggesting an expressive, culturally grounded coping mechanism. Unlike the trauma silence observed in Pakistan (Aziz & Yousaf, 2022), Bamenda youth articulate their emotional needs clearly and often seek spiritual help.

From a theoretical perspective, Ryff's Psychological wellbeing theory is affirmed in that psychological flourishing is absent, and core constructs such as autonomy and meaning-making are suppressed. Pearlin's Stress Process Theory is also validated: primary (violence, displacement) and secondary (poverty, educational barriers) stressors accumulate without sufficient mediating support.

However, limitations in these models are evident. Ryff's framework does not incorporate spiritual dimensions, which are vital in Bamenda. Pearlin's assumption that social support mitigates stress does not hold where caregivers and institutions are themselves distressed or under-resourced.

In conclusion, the findings confirm a deep psycho-social crisis among students, marked by low self-regard, diminished goals, and limited personal growth. While cultural and spiritual factors offer some relief, they cannot substitute for structured, trauma-informed psychological interventions. Future strategies must adapt globally accepted frameworks to local realities—emphasizing spirituality, institutional resilience, and coordinated psycho-social care.

CONCLUSIONS

The findings of this study lead to several important conclusions. First, armed conflict exposure is prevalent among students. Secondly, its effects on social and psychological well-being are complex and mediated by contextual, familial, and institutional factors. Thirdly, the absence of statistically significant correlations confirms the importance of the conceptual framework's emphasis on intervening variables and echoes psychological well-being theory's assertion that well-being is multi-determined.

The study confirms that the current support systems for students—whether in families, schools, or communities—are overstretched but invaluable. Their efforts to protect and nurture students underscore the importance of strengthening local psycho-social ecosystems. Teachers and parents are both affected and acting as first participants, often without formal training, institutional backing, or psycho-social resources.

Finally, the findings reinforce the significance of the study for a wide range of stakeholders. For school authorities and the Ministry of Education, the data provide a roadmap for targeted psycho-social interventions. For NGOs, it offers an evidence base for designing culturally grounded trauma response programmes. For academic researchers, it enriches the literature on youth resilience in armed conflict contexts. For parents, educators, and community leaders, it offers a mirror and a mandate to act.

RECOMMENDATIONS

The study calls on the Ministry of Education to spearhead a nationwide, trauma-informed-education policy for conflict-affected regions by 2026. This policy should appoint trained counsellors in schools, embed mental-health modules in the curriculum, and include a clear monitoring framework to gauge impact on student well-being and academic continuity.

At the institutional level, principals and teachers need twice-yearly in-service training to recognize trauma symptoms, provide basic emotional first aid, and channel serious cases to specialist care. Embedding peer-mentoring circles, teacher self-care workshops, and confidential counselling for staff will help educators, who are themselves often secondary victims, to sustain their caregiving roles.

Families likewise require support. Quarterly community sessions—run jointly by schools and churches—should demystify trauma, strengthen parent-child communication, and offer family therapy and livelihood assistance, empowering caregivers to stabilize children's emotional and educational trajectories at home. Complementing these efforts, education- and mental-health-focused NGOs are urged to pilot at least three evidence-based programmes in Bamenda III by 2026. Mobile trauma clinics, art- and story-based therapies, and peer-led support groups, all anchored in baseline and follow-up evaluations, can provide scalable models of care.

Faith communities remain an indispensable resource. Catholic dioceses and other religious bodies can weave pastoral counselling, trauma-awareness seminars, and spiritual mentoring into school and parish schedules each semester, strengthening the coping strategies students already rely on. Local government units and traditional leaders can reinforce this network by launching Youth Peace Clubs, after-school resilience programmes, and mediation spaces within a year, rebuilding fractured social ties and modelling constructive conflict resolution.

Finally, universities should partner with schools to run longitudinal evaluations of trauma-informed practices, testing tools such as student mental-health diaries and trauma-response kits to refine future interventions. Global donors and multilateral agencies are encouraged to channel funding toward inclusive education, regional trauma teams, teaching materials, and distance-learning platforms by 2027, ensuring that psycho-social support and academic continuity endure even when conflict disrupts the conventional school calendar.

Future Research

Three avenues deserve priority. First, longitudinal tracking is needed to chart how trauma exposure and well-being evolve as conflict ebbs or intensifies, and to gauge the durability of any interventions. Second, broader sampling that includes public schools, other faith traditions, out-of-school youth and non-urban districts would

test the transferability of current findings. Third, controlled trials of specific trauma-informed strategies—such as art therapy or teacher self-care curricula—are essential for isolating active ingredients and assessing cost-effectiveness.

Concluding Synthesis

This investigation offers the first systematic snapshot of how ongoing conflict reshapes the psychosocial landscape of Catholic secondary students in Bamenda III. The data reveal not only widespread trauma and diminished well-being but also persistent currents of hope manifested in residual trust, belief in societal progress and the sustaining power of faith. Translating these insights into trauma-responsive policies, school-centered interventions and community partnerships will be critical if Cameroon's conflict-affected youth are to recover their educational trajectories and realize their developmental potential.

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