

Resilience and quality of life among internally displaced person (POK refugees)

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ABSTRACT

The present research was designed to explore resilience and Quality of life among internally displaced persons (POK Refugees). The sample (160) was taken from Jammu district which included both males (80) and females (80) divided into two age group *i.e.* 50 -65yrs and 65-80yrs of both male and female of POK refugees (40 in each group). Connor–Davidson Resilience Scale and WHOQOL-BREF were used. Results of the study showed a Significant difference in Resilience and Quality of Life across gender as well as a Significant difference in Resilience and Quality of Life across different age groups. *i.e.* (50 -65yrs) and (65-80yrs), respectively, there was a non-significant difference on the dimension of Physical Health and Social relationship across different age groups. Males in both across Gender and across Age group scored better than females.

Key Words : Internal displacement, Resilience, Quality of life, Gender, Age group

INTRODUCTION

Six to seven million Muslims moved from India to Pakistan and nearly eight Million Hindus and Sikhs moved from Pakistan to India. Areas that were ravaged by Pakistan's aggression in 1947 included Mirpur, Poonch, Muzaffrabad and frontier districts of Ladakh and Gilgit and those refugees who were displaced from Mirpur, Poonch, Muzaffrabad are PoK (Pakistan occupied Kashmir) refugees. (Kumar, 2012). As they were fled from their home they are internally displaced and Internally displaced persons are those who have not crossed an internationally recognized state border but are obliged to flee or to leave their homes or places of habitual residence, particularly in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights, natural or human made disasters (Cohen, 1998). As being displaced can have severe adverse effects on the physical, social, emotional and spiritual well-being of a person. Exposure to violence or disaster, loss of or separation from family members and friends, deterioration in living conditions, the inability to provide for one's self and family, can all have immediate and long-term consequences for individuals, families and communities they usually have a relatively poor quality of life. The resilience of persons who have suffered severe trauma or disasters is influenced by the nature of the pre-migration trauma experienced by them, but it is also influenced by the post migration psycho-social circumstances and living conditions (Perez-Sales *et al.*, 2005) Recent studies identified prevalent accompanying symptoms, such as depression, anxiety, and anger (Chemtob *et al.*, 1997b; Kessler *et al.*, 1995), which may be pervasive with negative impact on quality of life. (Chemtob *et al.*, 1997b). The two variables that were

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