

## ABSTRACT

The present study describes the development and initial psychometric evaluation of the "Scale of Resilience Against Terrorism". Because of culture bound nature of this construct, an extensive exercise was undertaken to identify specific constructs covering resilience in Pakistani cultural context while using both theoretical and empirical approaches. Initially a fairly large pool of items was generated with the help of the focus groups, interviews with experts, students and literature out of which 74 items were retained. To evaluate it empirically, (n=276) males and (n=218) females were contacted from all walks of life and all over the country including people who have witnessed a terrorist attack and those who have heard it but haven't seen it. Principle component factor analysis was conducted to select items for SRAT and determine its construct validity which provided four factors solution (naming Pessimism, Self efficacy, Optimism, & sanctity and education) comprising of 52 items; selection criterion for factor loadings was .40 and above. Cronbach's alpha revealed significantly high internal consistency for scale and its subscales whereas the overall reliability of the scale was .82. Hence, final scale comprised of 52 items to measure the Resilience against Terrorism.

Second part of the study assessed the prevalence of PTSD, Resilience, quality of life and various coping strategies. The sample comprised of (N=392) participants randomly selected from various walks of life for this descriptive and correlational study. It was hypothesized that High risk group would be more affected by terrorism than low risk group which was rejected. Another hypothesis assumed that high and low risk groups would differ on level of resilience, quality of life and PTSD. It was proved that high risk group scored higher on resilience but significantly low on quality of life as compared to low risk group. But there were no significant differences on PTSD between both the groups. It was also approved through results that there was a positive relation between resilience and quality of life but no relation was found between PTSD and resilience or quality of life. The MANOVA indicated that three coping strategies would play important role in development of PTSD and Resilience, including positive reframing, acceptance and religious coping, on the other hand Age, Qualification and rest of the coping strategies would not play important role in development of Resilience. Regression analysis indicated that gender and status of the person can predict the level of resilience and PTSD as being in the high risk group makes a person more resilient and women were found to be more resilient as compared to men.

*The third part of the study was an experimental study comprising of N=16 participants purposely selected from the participant of study two who were found high on PTSD symptoms and low on resilience and quality of life. The participants were randomly allotted to two various conditions namely experimental and control group. This part dealt with the implication of an indigenously designed counseling program. It was assumed that special counseling program through written expression would decrease the symptoms of PTSD and consequently increase the resilience level and quality of life. No gender differences were found in response to counseling plans although inverse relation of PTSD with Resilience and quality of life was significantly improved in post-test condition.*

*The current study offers not only an indigenous scale of resilience but an indigenous counseling plan for the sufferers of PTSD which would be very helpful for health practitioners and general public as well.*