EMOTIONAL TRAUMA AND PSYCHOLOGICAL ADJUSTMENT AMONG INTERNALLY DISPLACED PERSONS IN BENUE NORTH-WEST NIGERIA: MEDIATING ROLE OF PSYCHOLOGICAL RESILIENCE

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Abstract

This study investigated emotional trauma and psychological adjustment among internally displaced persons in Benue North-west Nigeria; mediating role of psychological resilience. The study used cross-sectional survey design where 384 internally displaced persons comprising 128 (33.3%) males and 256 (66.7%) females were used. Their ages ranged from 20-55 years with a mean age of 32.727 years (SD=9.313). Multi-stage sampling was used to draw the sample while Emotional Trauma Scale, Connor-Davidson Resilience Scale and Brief *Psychological Adjustment Scale were used for data collection. Hypothesis one and two were* tested using Multiple linear regression, hypothesis three was tested using Process Mediation Analysis while hypothesis four was tested using Hierarchical Regression. Results indicated that there was a significant negative influence of emotional trauma on psychological adjustment among internally displaced persons $[R^2=.862, F(4,379)=592.919, p<.001]$. The result also indicated that there was a significant positive influence of psychological resilience on psychological adjustment among internally displaced persons R^2 =.111, F(5,378)=9.420, p < .001]. Also, resilience did not significantly mediate the relationship between emotional trauma and psychological adjustment among internally displaced persons R^2 = .207, F(2,381)=49.703, Int 1(X*M) ($\beta=-.0013$, t=-.0055, p>.05]. Lastly, after demographic variables were controlled, both emotional trauma and psychological resilience made a significant joint influence on psychological adjustment among internally displaced persons $[R^2=.669, F(3,374)=121.070, p<.001]$. It was recommended that clinical psychologists should assume the duty of educating internally displaced persons on the impact of trauma on their daily functioning.

Key Words: Psychological resilience, emotional trauma, psychological adjustment, IDPs

Introduction

Internal conflicts causing forced displacement of non-combatant populations appear to be a common global occurrence. Such displacement may usually be associated with substantial health and social impacts on internally displaced persons (IDPs) including acute and long-term effects on mental health (Cruz et al., 2020). Displacement has emerged as one of the greatest human tragedies of the 21st century. Populations experiencing conflict-driven internal displacement undergo highly traumatic migration episodes and endure displacement periods lasting several decades (Bender et al., 2019). These experiences may strongly affect the long-term health of displaced populations and present a high risk of developing mental disorders if their coping capacity is exceeded. This scenario is capable of causing psychological maladjustments among internally displaced persons.

Although posttraumatic stress symptoms can be considerably improved by psychological interventions (Brown et al., 2017), difficulties with psychological adjustment may remain unimproved in traumatized youths (Forooshani et al., 2019). When psychological adjustment problems are not improved, it can result in major risks for mental health problems such as increased vulnerability to depression and anxiety. The issues related to psychological adjustment can especially be expected amongst youth populations, because adolescence and young adulthood represent critical stages of development in terms of the rapid changes, and adjusting with new social roles, norms, and expectations (Ovuga& Larroque, 2012).

Psychological adjustment problems reflect the individual's subjective emotional distress and the effects of emotional distress in daily life (Cruz et al., 2020). Individuals who are highly adjustable engage in more functional behaviours in daily life. Psychological maladjustment has been associated with excessive stress (Samios, 2018), and poor satisfaction with life (Chambers et al., 2017). Studies have provided evidence that poor psychological adjustment may be associated with several undesirable conditions, from psychosocial problems (Bender et al., 2019) to psychopathological problems (Freitas et al., 2013). Therefore, it is important to understand why difficulties with psychological adjustment in traumatized youth are resistant to improvement. It seems that there is a complex relationship between trauma and psychological adjustment that has been overlooked in trauma-focused interventions (Forooshani et al., 2019; McLean et al., 2013).

The situation in Benue State is more spectacular not because of the large number of persons affected but the consistency with which it reoccurs among the communities surrounding the borders of Taraba and Nasarawa States. The recurring crisis between Fulani herdsmen and farmers in Benue State has engendered the displacement of many residents of the affected areas of the state. Thousands of people have been rendered homeless by the incessant crisis where most of the internally displaced persons are mainly from Agatu, Guma, Logo, Gwer West, Gwer East, Buruku, Tarka, Katsina-Ala, Ukum and Makurdi Local Government Area of the state. The affected population in these areas is

exposed to harsh conditions as a result of prolonged displacement arising from the conflict (Sheikh et al., 2014). This situation has brought about the emergence of so many internally displaced persons (IDPs) living within thestate. Many factors are implicated in the prediction of psychological adjustment. Some of them include emotional trauma and psychological resilience.

One factor that is likely to be implicated in predicting the psychological adjustment of internally displaced persons is emotional trauma (Major, 2019). The term emotional trauma represents the psychological variability in how people respond to trauma in affective domains (Bonanno & Mancini, 2012). These authors have identified four different patterns of response to a traumatic event: chronic dysfunction, delayed reactions, recovery, and resilience. First, chronic dysfunction in response to trauma involves a diagnosis of posttraumatic stress disorder (PTSD), anxiety, or depression. Next, delayed reactions result in the presentation of the early signs and symptoms of a diagnosable disorder that gradually decline over time. Furthermore, recovery includes a brief disruption in daily functioning in which one slowly returns to their normal levels of performance. Lastly, resilience occurs when someone experiences a stress reaction that does not have a negative influence on their ability to function. Overall, emotional trauma is used in order to emphasize that there is a wide range of potential responses to trauma (Jolley, 2017). Many foreign studies (Forooshani et al., 2021; Major, 2019; Sheikh et al., 2014) have examined the roles of emotional trauma on psychological adjustment. However, these

findings have been obtained in foreign cultures with no dependable data for interventions among internally displaced persons in Benue State. More so, there is likelihood for mediating factors to serve as catalysts for the relations between emotional trauma and psychological adjustment.

One factor that seems to have a mediating effect on the predictors of psychological adjustment of internally displaced persons is psychological resilience. Resilience entails "the ability to adapt well in he face of adversity, trauma, tragedy, threats, or even significant sources of stress such as family and relationship problems, serious health problems, or workplace and financial stressors (American Psychological Association, 2013). It involves the ability to "maintain normative, or positive, development in the presence of risk" (Madewell & Ponce-Garcia, 2016, p. 250). Those deemed to be resilient continue to maintain optimal levels of mental and physical health in response to threat. Lee et al. (2012) in their review on resilience, put forward its three main aspects; resilience asa capacity, as a process and as a result. Resilience has been found to play vital roles in promoting and enhancing individuals' well-being by various researchers (Fabio & Palazzeschi, 2015; Scoloveno, 2015; Hasse et al.,2014). The study seeks to examine the following objectives:

- i. examine the influence of emotional trauma on psychological adjustment among internally displaced persons in Benue North-west Nigeria.
- ascertain the influence of psychological resilience on psychological adjustment among

internally displaced persons in Benue North-west Nigeria.

- iii. explore the mediating role of psychological resilience on the relationship between emotional trauma and psychological adjustment among internally displaced persons in Benue North-west Nigeria.
- investigate the joint influence of emotional trauma and psychological resilience on psychological adjustment among internally displaced persons in Benue North-west Nigeria.

Maloney et al. (2022) examined how maternal and paternal trauma exposure, emotional security, and mental health are related to parent-reported scores of adolescent psychological adjustment, while controlling for adolescent trauma exposure and security in the family. The sample included N = 68 family units living in the Gaza Strip, with two parents and one adolescent surveyed within each unit (adolescent mean age=14.03 years). The regression model examining maternal factors was significant overall, with increased maternal depression associated with greater adolescent adjustment difficulties and greater maternal emotional security in the family associated with fewer adolescent adjustment difficulties. The regression model examining paternal factors was also significant, with increased paternal trauma exposure associated with greater adolescent adjustment difficulties. However, the independent variable in this study was not emotional trauma, the sample was not displaced persons and the study setting was not in Benue State.

Forooshani et al. (2021) examined the links between trauma and social adjustment. A total of 604 young adults (aged 18–24; living in Australia) from different backgrounds (refugee, non-refugee immigrant, and Australian) were assessed through self-report questionnaires. The data were analyzed through path analysis and multivariate analysis of variance. Two path analyses were conducted separately for migrant (including non-refugee and refugee immigrants) and Australian groups. Analyses indicated that cognitive avoidance and social problem solving can significantly mediate the relation between trauma and social adjustment. The model explaining this process statistically fit the data. According to the model, reacting to trauma by cognitive avoidance (i.e., chronic thought suppression and over-general autobiographical memory) can disturb the cognitive capacities that are required for social problem solving. Consequently, a lack of effective social problem solving significantly hindered social adjustment. There were no significant differences among the Australian, non-refugee immigrant and refugee participants on the dependent variables. Moreover, the hypothesized links between the variables was confirmed similarly for both migrant (including refugee and non-refugee immigrants) and Australian groups. However, this study was focused on social adjustment and not psychological adjustment as is done in the present study.

Yildirim et al. (2022) investigated the predictive effect of resilience on psychological adjustment and satisfaction with life among undergraduate students during the second wave of the COVID-19 pandemic in Turkey. In this cross-sectional study, a convenience sampling method was utilized to recruit undergraduate students from a public educational institution in Turkey. Psychometric valid tools, such as the Brief Resilience Scale (BRS), Brief Psychological Adjustment-6 (BASE-6) and Satisfaction with Life Scale (SWLS) were used to measure the primary outcomes of the study. Data were analyzed using the independent samples t-test, one-way ANOVA, Pearson correlation, and hierarchical multiple regression. Of total 224 undergraduates participated in this study, nearly 74% were males and the mean age of the sample was 21.03 ± 1.66 years. More than half of the participants had average socioeconomic status (53.57%) followed by above-average (40.18%) and below-average (6.25%). The results indicated that males and individuals who had low socioeconomic status reported greater psychological maladjustment problems. Furthermore, the resilience negatively predicted the psychological maladjustment and positively predicted satisfaction with life after controlling for age, gender, and perceived socioeconomic status. This study has the weakness of been limited to the COVID-19 context, undergraduate students and the sample was limited to Turkey. This has completely excluded the IDPs in Benue from the scope.

Durna et al. (2022) examined the various psychological characteristics that affect psychological maladjustment in children undergoing orthodontic treatment. In this context, the predictive and mediating relationships between emotional reactivity, intolerance of uncertainty, psychological resilience and psychological maladjustment were considered. The study was conducted cross-sectionally with 543 children and adolescents aged 10-18 years, who were being treated at a state university orthodontic clinic in Turkey. Standardized measurement tools (The Emotional Reactivity Scale, Intolerance of Uncertainty Scale, Brief Resilience Scale and Depression Anxiety Stress Scale) and online data collection processes were used in the data collection process. The findings show that emotional reactivity and intolerance of uncertainty pose a risk for psychological maladjustment in children and adolescents receiving orthodontic treatment, but psychological resilience has a protective function against this risk. However, this study was limited to children undergoing orthodontic treatment and not internally displaced persons in Benue State.Based on the identified gaps, the following hypotheses were postulated:

- i. Emotional trauma will significantly influence psychological adjustment among internally displaced persons in Benue Northwest, Nigeria.
- ii. Psychological resilience will significantly influence psychological adjustment among internally displaced persons in Benue Northwest, Nigeria.
- Psychological resilience will significantly mediate the relationship between emotional trauma and psychological adjustment among internally displaced persons in Benue Northwest, Nigeria.
- iv. Emotional trauma and psychological resilience will jointly influence psychological adjustment among internally displaced persons in Benue Northwest, Nigeria when demographic variables are controlled.

Design

This study adopted cross-sectional survey design to investigate the mediating role of psychological resilience in the relationship between emotional trauma and psychological adjustment among internally displaced persons in Benue North-west Nigeria. This type of design was adopted because the study assessed the respondents across different characteristics and drew relational scientific inferences without any form of manipulations. The independent variable was emotion trauma, the mediating variable was psychological resilience while the dependent variable was psychological adjustment.

The population for this study is 83,281 IDPs (BENSEMA, 2022). This is the working population since it is the sum total of internally displaced persons in the selected camps used for the study.

For the purpose of determining the sample size for this study, the Krejcie and Morgan table (Krejcie& Morgan, 1970) was used. Since the study population is 83,281 internally displaced persons (BENSEMA, 2022), using the table, a sample of 384 internally displaced persons was drawn for the study. This table is attached in the appendix.

This study employed the use of Multi-Stage Sampling technique. At the first stage, the Stratified Sampling technique was used. This is a form of probability sampling in which the target population is composed of strata and each stratum is duly represented in the sample. This sampling technique was used because the population (IDPs) in Benue Northwest exists in diverse camps and communities which all have to be taken into consideration. At the second stage, the simple random sampling was used where each stratum was randomly sampled for the study. The various strata that constituted the sample are as seen below:

Gbajimba Camp 13561 x $\frac{384}{83281} = 62.43$ 62

Daudu Community $19518 \times 384 = 89.99 \times 90$ 83281 1

Gbajimba Community 12321 x $\frac{384}{56.81} = 56.81$ 57 83281 x $\frac{384}{1} = 56.81$ 57

Gwer-West	26826	x 384 = 123.69	124
	83281	1	

LGEANASME
$$11055 \times 384 = 50.97 \times 51$$

83281 1

Therefore, a total of 384 internally displaced persons was considered for the study.

The participants for this study were 384 internally displaced persons comprising 128 (33.3%) males and 256 (66.7%) females. Their ages ranged from 20-55 years with a mean age of 32.727 years (SD=9.313). As for their ethnic groups, 357 (93%) were Tiv while 27(7%) were from other ethnic groups. Still among them, 202 (52.6%) were Christians, 64 (16.7%) were Muslims while 118 (30.7%) were from other religions. Considering their marital status, 152 (39.6%) were single, 138 (35.9%) were married, 44 (11.5%) were divorced while 50 (13%) were separated. In terms of their duration in camp, 178 (46.4%) were there for 1-5years, 114 (29.7%) were there for 6-10years while 92 (23.9%) were there for over 10 years.

Emotional Trauma was measured using the Emotional Trauma Scale developed by Sullivan et al. (2017). It is a 19-item, penciland-paper, self-report instrument designed to assess the emotional intrusion, avoidance and arousal symptoms associated with traumatic events. Respondents are instructed to read each item and indicate the option that describes them using a 4-point Likert response format ranging from 1 (definitely false) to 4 (definitely true). The scale is comprised of four subscales: Emotional control (items 1-7), Emotional Avoidance (items 8-14), Emotional threat (items 15-17) and Emotional pity (items 18-19). Scores for the full scale and each subscale are obtained by summing the items assigned to each. The present study reported alpha coefficients for the scale and its subscales as follows: Full Scale (α =.87), Emotional Control (α =.72), Emotional Avoidance (α =.71), Emotional Threat (α =.83) and Emotional Pity (α =.75). This instrument was subjected to face and content validation. Sample of items include; "Emotions give me the energy to act quickly after trauma", "I get enraged if I couldn't avoid my thoughts about traumatic events".

Psychological Resilience was measured using the Connor-Davidson Resilience Scale developed by Connor and Davidson (2003). The scale has 25 items and is measured on a 5-point scale of 0 (not true at all) to 4 (nearly true all the time) with high scores indicating greater resilience and vice versa. The scale has 5 factors; Personal Competence (items 10, 11, 12, 16, 17, 23, 24, 25, α =.78), Tolerance (items 6, 7, 14, 15, 18, 19, 20, α =.88), Positive Acceptance of Change (items 1, 2, 4, 5, 8, α =.76), Control (items 13, 21, 22, α =.79) and Spiritual influence (items 3 and 9, α =.72). The present study obtained alpha coefficients as follows; Full Scale (α =.87), Personal Competence (α =.78), Tolerance (α =.79), Positive Acceptance of Change (α =.73), Control (α =.74) and Spiritual influence (α =.71). This instrument was subjected to face and content validation. Sample of items include; "I am able to adapt to changes that are traumatic", "I tend to bounce back after traumatic experiences".

Psychological adjustment was measured using the Brief Psychological Adjustment Scale developed by Cruz et al. (2019). The BASE-6 is a brief PROM assessing general psychological adjustment. The measure was developed for clinical and research use. The uni-dimensional scale is measured using a format of 0 (Never) to 3 (always). The BASE-6 demonstrated good internal consistency ranging from .87 to .93 and there was good test-retest reliability (intraclass correlation=.77) across 1 week. The present study obtained an alpha coefficient of .71. This instrument was subjected to face and content validation. Sample of items include: "How much has emotional distress interfered with feeling good about yourself this week?", "To what extent have you felt unhappy, discouraged, and/or depressed this week?"

This study was conducted among internally displaced persons in Benue Northwest. The researchers obtained ethical approval from the Benue State Emergency Management Agency to collect data on internally displaced persons. The consent of the internally displaced persons was sought before the administration of questionnaire was carried out. All ethical issues were taken into consideration in the data collection process. Research assistants wererecruited in each IDP camp visited and given proper orientation on research ethics and procedures. Secret balloting was used to draw the sample for the study, the drawn sample was then exposed to the questionnaire copies. After the administration of 400 copies of the questionnaire, only 384 copies representing a return rate of 96% were returned and found useful for statistical analyses. analyzed using both descriptive and inferential statistics. The descriptive statistics employed include mean, standard deviation, frequencies and simple percentages which were used to summarize the demographic variables of the respondents. Meanwhile, hypothesis one and two were tested using Multiple linear regression, hypothesis three was tested using Process Mediation Analysis while hypothesis four was tested using Hierarchical Regression.

The data collected in this study were

Results

 Table 1: Summary of Multiple Linear Regression showing the influence of emotional trauma on psychological adjustment among IDPs in Benue-Northwest.

Variables	R	\mathbf{R}^2	F	df	β	t	sig.	
Constant	929	.862	592.919	4,379		64.035	.000	
Emotional Control					.911	-33.445	.000	
Emotional Avoidance					.236	4.832	.000	
Emotional Threat					895	-25.174	.000	
Emotional Pity					.728	18.923	.000	

(Source: Field Work 2023)

The result presented in table 1 indicated that there was a significant negative influence of emotional trauma on psychological adjustment among internally displaced persons [R²=.862, F(4,379)=592.919, p<.001]. The result further indicated that emotional trauma explained 86.2% of the variation in psychological adjustment meaning that, internally displaced persons who experience emotional trauma are likely to have difficulties with adjusting, coping and adapting to displacement conditions. As for the dimensions; emotional control $(\beta = .911, t = .33.445, p < .001)$ positively predicted psychological adjustment; meaning that IDPs with emotional control can adjust better than those without

emotional control. Also, emotional avoidance (β =.236, t=4.832, p<.001) positively predicted psychological adjustment; meaning that IDPs who avoid emotional problems can adjust better than those face emotional problems. Emotional threat (β =-.895, t=-25.174, p<.001) negatively predicted psychological adjustment; meaning that IDPs who receive emotional threats may have difficulties with psychological adjustment. Lastly, emotional pity (β=.728, t=18.923, p<.001) made significant positive contributions to psychological adjustment; meaning that IDPs who have emotional pity will adjust better than those without emotional pity. Thus, hypothesis one was supported.

 Table 2: Summary of Multiple Linear Regression showing the influence of psychological resilience on psychological adjustment among IDPs in Benue-Northwest.

Variables	R	\mathbf{R}^2	F	df	β	t	sig.	
Constant	.333	.111	9.420	5,378		8.214	.000	
Personal Competence					.388	4.947	.012	
Tolerance					.506	5.725	.007	
Positive Acceptance of C	Change				.203	4.436	.015	
Control					.817	7.531	.000	
Spiritual Influence					.320	4.831	.000	
(0 - T' + 1 + W + 2 + 0)								

(Source: Field Work 2023)

The result presented in table 2 indicated that there was a significant positive influence of psychological resilience on psychological adjustment among internally displaced persons [R^2 =.111, F(5,378)=9.420, p<.001]. The result further indicated that psychological resilience explained 11.1% of the variation in psychological adjustment meaning that, internally displaced persons who develop resiliency post-displacement are more likely to adjust psychologically and cope better. As for the dimensions; personal competence (β =.388, t=4.947, p<.01), Tolerance (β =.506, t=5.725, p<.01), Positive acceptance (β =.203, t=4.436, p<.01), Control (β =.817, t=7.531, p<.001) and spiritual influence (β =.320, t=4.831, p<.001) made significant contributions to psychological adjustment. Thus, hypothesis two was also supported.

Table 3: Summary of Process Mediation Analysis showing the mediating role of psychological resilience on the relationship between emotional trauma and psychological adjustment among IDPs in Benue Northwest.

Variable	R	\mathbf{R}^2	F	df	ß	t	Sig.	LLCI	ULCI
Constant	.455	.207	49.703	2,381		18.6607	.000	24.4028	30.1510
Emotional Trauma					1197	-9.7615	.000	1438	0956
Resilience					0320	-1.8809	.060	0654	.0015
Int_1 (X * M)					0013	0055	.067	0123	.0105

The result shown in table 3 shows that resilience did not significantly mediate the relationship between emotional trauma and psychological adjustment among internally displaced persons; $[R^2 = .207, F(2,381)=49.703, Int_1(X*M) (\beta=-.0013, t=-.0055, p>.05]$. The result further showed that emotional trauma (β =-.1197, t=-9.7615, p<.001) significantly predicted psychological adjustment while resilience (β =-.0320, t=-1.8809, p>.05) made no significant contribution to psychological adjustment. This means that the impact of emotional trauma on psychological adjustment among internally displaced persons cannot be enhanced by their level of resiliency. Therefore, hypothesis three was not supported.

Variables	Model 1	Model 2	Model 3
Sex	.605	.029	.038
Age	.125	003	003
Religion	.156	790	796
Marital Status	677	302	307
Duration in Camp	.422	570	.568
Emotional Trauma		280	276
Psychological Resilience			.403
R^2	.475	.575	.669
F	3512.461	17638.727	15081.640
$? R^2$.475	.118	.344
? F	3512.461	1860.818	121.070

Table 4: Summary of Hierarchical Regression showing the joint influence of emotional trauma and psychological resilience on psychological adjustment among IDPs when demographic variables are controlled.

(Source: Field Work 2023)

The result presented in table 4 indicated that there was a significant influence of demographic variables on psychological adjustment among internally displaced persons [R^2 =.475, F(5,378)=3512.461, p<.001]. The result further indicated that demographic variables explained 47.5% of the variation in psychological adjustment. As for the individual variables; sex (β =.605, t=24.382, p<.001), age (β =.125, t=14.477, p<.001), religion (β =.156, t=-19.907, p<.001), marital status (β =-.677, t=-29.685, p<.001) and duration in camp (β =.422, t=31.645, p<.001) made significant contributions to psychological adjustment.

In the second model, there was a significant influence of emotional trauma on psychological adjustment among internally displaced persons [? $R^2 = .118$, ? F(1,377)=1860.818, p<.001]. At this stage the contributions of models 1 & 2 to psychological adjustment rose to 57.5%.

In the third model, there was a significant influence of psychological resilience on psychological adjustment among internally displaced persons [? $R^2 = .669$, ? F(1,376)=121.070, p<.001]. At this stage, the contributions of models 1, 2 & 3 to psychological adjustment rose to 66.9%. This indicates that after demographic variables were controlled, both emotional trauma and psychological resilience made a significant joint influence on psychological adjustment among internally displaced persons.

Discussion

Hypothesis one was tested to find out if emotional trauma will significantly influence psychological adjustment among internally displaced persons in Benue Northwest. Findings indicated that there was a significant negative influence of emotional trauma on psychological adjustment among internally displaced persons. Emotional trauma entails the affective impact of any life-threatening event on an individual. Among IDPs, this could involve anger responses, prolonged desperation, and sadness due to grief. Hence, it is not weird for emotional trauma to negatively predict psychological adjustment. This finding implies that emotionally traumatized internally displaced persons may find it very difficult to adjust, cope and adapt to their present displaced conditions compared to their counterparts who are less or not traumatized at all. This finding thus agrees with Maloney et al. (2022) who found that increased depression was associated with greater adolescent adjustment difficulties. Another related study by Forooshani et al. (2021) indicated that cognitive avoidance and social problem solving can significantly mediate the relation between trauma and social adjustment.

Hypothesis two was tested to find out if psychological resilience will significantly influence psychological adjustment among internally displaced persons in Benue Northwest. Findings indicated that there was a significant positive influence of psychological resilience on psychological adjustment among internally displaced persons. Resilience entails the ability to use one's coping skills to regain control and bounce back to normal functioning after a distressing event. In this study, it is not strange to have a result showing the positive influence of resilience on psychological adjustment. This implies that internally displaced persons who can withstand the impact of displacement can as well adjust their lives to fit the new normal created by internal displacement. This finding thus agrees with Yildirim et al. (2022) who found that resilience negatively predicted psychological maladjustment. Relatedly, Durna et al. (2022) found that emotional reactivity and intolerance of uncertainty pose

a risk for psychological maladjustment in children and adolescents receiving orthodontic treatment, but psychological resilience has a protective function against this risk. Another study by Sampogna et al. (2021) found that adaptive coping strategies and resilience levels did not have any significant protective impact on the levels of depressive, anxiety, and stress symptoms. Although they found that high levels of resilience were predicted by adaptive coping strategies, such as acceptance.

Hypothesis three was tested to find out if psychological resilience will significantly mediate the relationship between emotional trauma and psychological adjustment among internally displaced persons in Benue Northwest. Findings indicated that there was no significant mediation of psychological resilience on emotional trauma and psychological adjustment among internally displaced persons. This finding implies that the impact of emotional trauma on psychological adjustment may not be easily heightened by the resilience skills of the internally displaced persons. This finding however lacks the support of previous finding due to unavailability of related studies.

Hypothesis four was tested to find out if emotional trauma and psychological resilience will jointly influence psychological adjustment among internally displaced persons in Benue Northwest after controlling for demographics. Findings indicated that there was a significant joint influence of emotional trauma and psychological resilience on psychological adjustment among internally displaced persons when demographic variables were controlled. However, this finding lacks the support of previous studies because only a few studies have been conducted in this context.

Conclusion

From the results obtained from this study, it was concluded that emotional trauma is an antecedent of psychological adjustment among internally displaced persons in Benue North-west. Also, psychological resilience is significant predictor of psychological adjustment among internally displaced persons in Benue North-west. In addition, psychological resilience is not a significant mediator of the influence of emotional trauma on psychological adjustment among internally displaced persons in Benue Northwest. Lastly, emotional trauma and psychological resilience are joint predictors of psychological adjustment among internally displaced persons in Benue Northwest.

Based on the results of the present study, the following recommendations are made for both clinicians and health managers. It is recommended that clinical psychologists should assume the duty of educating internally displaced persons on the impact of trauma on their daily functioning. The internally displaced persons should be equipped with the knowledge that trauma is best managed when the survivor faces and develops skills to handle the after-math of the trauma rather than avoiding triggers of the traumatic event. Also, clinical psychologists should help them find solutions and strategies to gradually adjust their lives amidst the impact of the emotional trauma

they are facing.

There were many limitations met in the process of undertaking this research. First, there are limited number of related researches conducted in this area to-date. This explains the obsolesce in the empirical literature reviewed in the present study. If more current literature were available, the finding in this study would have been discuss more exhaustively. The researchers were able to overcome this by using the few available current literature to discuss the findings.

This study has made great contributions to the already existing body of knowledge in the area of psychological adjustment. The study has provided additional evidence on the form of data and literature to confirm the challenges faced by internally displaced persons in Benue State. With this evidence, internally displaced persons are educated on the impact of emotional trauma and resilience on their ability to adjust. Also, researchers can use these findings to form metaanalytical studies on the predictors of psychological adjustment. More so, this study serves to call and re-direct the attention of philanthropists, aid agencies and the United Nations (UN) to garner and focus their interventions to displaced settlements in Benue.

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