

Emotional Abuse, Self-Regulation and Psychological Health among Internally Displaced Persons in Benue State

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Abstract

Internal displacement affects people mentally, socially and physically. In some cases, these displaced persons suffer different forms of abuses in the camps where they take refuge. Therefore, this study investigated emotional abuse, self-regulation and psychological health among internally displaced persons in Benue State. In this study, cross sectional method was used and Multi-Stage Sampling technique was adopted to draw 384 internally displaced persons in Benue State. Emotional Abuse Scale, Self-Regulation Questionnaire and Warwick-Edinburgh Mental Wellbeing Scale were used for data collection. The result indicated that there was a significant influence of emotional abuse on psychological health among internally displaced persons. As for the dimensions, both direct abuse and covert abuse negatively predicted psychological health among internally displaced persons. The result also indicated that there was a significant influence of self-regulation on psychological health among internally displaced persons. In terms of the dimensions, the result indicated that the dimensions; Affect, Awareness, and Empowerment made significant positive contributions to psychological health among internally displaced persons. Lastly, the result indicated that there was a significant joint influence of emotional abuse and self-regulation on psychological health among internally displaced persons. It was recommended that the government of Benue State should set up secondary healthcare psychiatric facilities for internally displaced persons who are experiencing moderate to severe emotional abuse and psychological health challenges which should be free of charge. This initiative will augment the counselling support offered by NGOs in IDP camps which is just but an aspect of the minimum service package. It will also reduce the impact of the emotional abuse faced by internally displaced persons post displacement.

Key Words: Emotional Abuse, Self-Regulation, Psychological Health, Benue State

Introduction

Psychological health is a multidimensional concept covering the ability to express emotions appropriately, think rationally, relate socially and make vital efforts to support one's immediate community (Durosaro & Ajiboye, 2021). In our contemporary society, one of the

greatest challenges facing the masses is maintaining an optimal state of psychological health. This is often exacerbated by the ever-increasing conflicts among nations/communities, and the huge economic, social, and political expenses that accompany them (Siriwardhana & Stewart, 2023). The mental health issues of internally displaced persons include a wide spectrum of problems with varied symptoms 'characterized by abnormal thoughts, emotions, behaviour and relationships with others. According to the WHO, one in five persons who have been displaced from their dwellings suffer from mental health disorders. It is an estimate that translates to 409,320 displaced persons in the North East (World Health Organization, 2023).

The common disorders affecting internally displaced persons mainly include depression, anxiety and post-traumatic stress disorder. Kaiser et al. (2019) reported that 60% and 75% of persons displaced in North-East Nigeria experienced a symptom or an impairment related to mental health respectively. Depression and post-traumatic stress disorder (PTSD) are commonly reported among internally displaced persons in Nigeria (Morina et al., 2018). The mental health of internally displaced persons is often affected by traumatic experiences alongside personal behavioural and environmental characteristics (Durosaro & Ajiboye, 2021). Ekezie et al. (2022) reported that the quality of life and the wellbeing of displaced persons was affected by the poor living conditions in the camps. Due to the complexity of the human system, there are many biopsychosocial factors that affect the mental health of internally displaced persons. However, this study focuses on the roles of emotional abuse and self-regulation on psychological health.

One variable implicated in the determining psychological states of internally displaced persons is emotional abuse. This concept covers any behaviour exerted on another person that is humiliating, image-tarnishing and which undermines their dignity. Displaced persons are often marginalized and stigmatized upon in the communities they take refuge. This negative attitudes of the society toward survivor of uneven circumstances is perceived as degrading and evokes feeling of abuse among internally displaced persons (Al-Shail et al., 2022; Palusci & Ondersma, 2022). According to Nezlek et al. (2022), people who regularly feel ignored also report lower levels of self-esteem, belonging, and meaning in their lives. Similarly, Tanaka et al. (2021) found that emotional abuse was uniquely linked with lower self-compassion and high neurotic problems. There are however, only few studies that have highlighted the impact of emotional abuse on psychological health. This calls for the present study as a gap filler.

Another variable of interest in predicting psychological health is self-regulation. Self-regulation entails one's control over his/her thoughts, emotions, behaviors, and impulses and it has been associated with better life outcomes (Moffitt et al., 2021). Among younger adults, better self-regulatory ability and strength (i.e., the motivation and capacity to meet self-regulatory demands), might be indexed by two measures. Among younger adults, self-regulation is likened to better psychological functioning (Crowe et al., 2017). People with better self-regulatory ability and strength generally engage in healthier behaviors and enjoy better physical and mental health (Buckley et al., 2019; Ginis & Bray, 2020). However, the impact of both emotional abuse and self-regulation on psychological health has not been examined among internally displaced persons in Benue State. This gap in literature and data formed the basis for the present study.

Emotional Abuse and Psychological Health

Scott et al. (2023) examined the associations between experiences of child maltreatment and mental disorders in the Australian population. Associations between experiences of child maltreatment and mental disorders were strongest for sexual abuse, emotional abuse and multi-type maltreatment. However, the strength of the associations did not differ by gender. Adjustment

for childhood and current financial hardship and for current socio-economic status did not significantly attenuate the associations. This study is significantly related to the present study but differs in that, it assessed mental disorders rather than mental health, child maltreatment rather than emotional abuse and it also failed to adopt an IDP-sample for the study.

Barros et al. (2022) investigated the effect of traumatic childhood experiences on the relationship between depression and psychological well-being in a sample of university students. This study employed cross-sectional survey design. Results indicated that emotional neglect and abuse stand out as the types of maltreatment with the greatest impact on mental health, associated first with a decrease in the self-acceptance dimension of psychological well-being and then with depressive symptomatology in adulthood. This study is criticized for failing to adopt internally displaced persons sample and also, the setting was not in Benue State.

Qasim and Muzaffar (2021) examined the predicting role of emotional abuse to developmental health problems among married individuals and its impact on their quality of life. Results exposed that there was significant strong negative correlation among emotional abuse, mental health and quality of life. The findings of the research highlighted association among emotional abuse, mental health problems and quality of life. The results of the study could be useful for enhancing the awareness on the effect of emotional abuse and the necessity of preventing abuse.

Adikwu et al. (2021) examined the impact of emotional abuse on the mental health of women in abusive marriages in communities in Gwagwalada, Federal Capital Territory, Nigeria. Findings revealed that 95.2 per cent (566) of the sample in one time or the other in their marriage have suffered one form of emotional abuse. They also found that 93.8 percent of the respondents suffered psychologically as a result of emotional abuse from their spouse. The correlational analysis also revealed a strong significant relationship between emotional abuse and mental health issue among married women. The study therefore concluded that emotional abuse affects the mental health of married women in communities in Gwagwalada, Federal Capital Territory, Nigeria. The study therefore calls for increase in support service for those in abusive relationship.

Self-Regulation and Psychological Health

Mojsa-Kaja and Ivcevic (2023) examined whether insomnia could constitute a mediation mechanism that explains the relationship between emotion regulation strategies (rumination, reappraisal, suppression) and stress-induced mental health outcomes during the COVID-19 pandemic. The results showed that insomnia mediated the relationships between all 3 emotion regulation strategies and stress, anxiety and depression. They concluded that the presented results shed the light on the role of insomnia on the relationships between emotion regulation strategies and emotional states experienced during the COVID-19 pandemic. However, this study was limited to the COVID-19 context and also neglected the internally displaced persons population from the study.

Li et al. (2023) investigated whether self-esteem (SE) and emotion regulation strategies (cognitive reappraisal (CR) and expressive suppression (ES)) affect the association between CT and mental health in adulthood, including depression and anxiety symptoms. After controlling for age and sex, they found that (i) SE mediated the associations between CT and depression symptoms in adulthood, and CT and anxiety symptoms in adulthood; (ii) cognitive reappraisal moderated the association between CT and self-esteem; and (iii) expressive suppression moderated the association between of CT and mental health in adulthood via self-esteem, and such that both the CT-SE and SE-mental health pathways were stronger when expressive suppression is high

rather than low, resulting the indirect effect was stronger for high expressive suppression than for low expressive suppression. This study has the major weakness of using emotion regulation rather than self-regulation which is the mother-concept used in the present study.

Hajifathali et al. (2021) evaluated the relation between three components of self-regulation including integrative self-knowledge, mindfulness, self-control, and some variables of mental health and self-conscious emotions. Results indicated a negative correlation between self-regulating variables, depression, and anxiety. Their data also revealed that self-esteem positively related to integrative self-knowledge, mindfulness, and self-control. Among self-conscious emotions variables, authentic pride had a positive correlation with self-regulating variables whereas feelings of shame appeared a negative relationship with them. This study is criticized for using university students rather than internally displaced persons for the study.

Aali et al. (2021) investigated the psychological profile and quality of life in allergic patients and to identify the role of cognitive emotion regulation strategies in this field. The results of multivariate regression analysis showed that self-blame, other blame and rumination have a significant and positive relationship with symptoms of mental health disorders which can predict them significantly. Also, positive refocusing and planning have positive significant relationships with quality of life and can predict them significantly. However, the study was not carried out among internally displaced persons but patients. This limitation is covered in the present study.

Emotional Abuse, Self-Regulation and Psychological Health

Zhou and Zhen (2022) examined the mechanisms underlying the effect of physical and emotional abuse on depression and problematic behaviours through emotional regulation and anger in Chinese adolescents. Results indicated that physical abuse had direct positive effects on problematic behaviours but not on depression. However, emotional abuse had direct effects on depression and problematic behaviours, and indirect effects on both psychopathologies through expressive suppression and anger. They concluded that physical and emotional abuse had distinct effects and influencing mechanisms on adolescents' externalizing and internalizing problems. Compared with physical abuse, emotional abuse elicited more harms and subsequent psychopathologies.

Pomerantz (2019) examined how childhood emotional maltreatment (CEM) influence symptoms of anxiety. Results indicated that engaging in a healthy lifestyle partially mediated the relationship between EN and anxiety. The mediating effect of lifestyle behaviours on EA and anxiety was not significant. In addition, gender was not found to moderate EA or EN and symptoms of anxiety. The limitations of the study and future directions were discussed.

Kaiser and Malik (2015) examined the impact of emotional maltreatment on the mental health among adolescents. The findings indicated that emotional maltreatment is a significant predictor of mental health problems among adolescents. Results further indicated that optimism partially moderated the relationship between emotional maltreatment and mental health. They concluded that the research has implications for increasing parental awareness of their actions and behaviours and its negative consequences on the mental health of their children.

Hypotheses

- i. Emotional abuse will significantly influence psychological health among internally displaced persons in Benue State.
- ii. Self-regulation will significantly influence psychological health among internally displaced persons in Benue State.

- iii. There will be a significant joint influence of emotional abuse and self-regulation on psychological health among internally displaced persons in Benue State.

Design

This study adopted cross-sectional survey design to investigate emotional abuse, self-regulation and psychological health among internally displaced persons in Benue State. This design was deemed appropriate because it gives room for the researchers to gather the opinions of displaced persons at one point in time in order to make relational inferences. In this study, the independent variables were emotional abuse and self-regulation while the dependent variable was psychological health.

Population

The total number of internally displaced persons in the selected local government areas (Guma, Gwer West and Makurdi) is 230,458 (BENSEMA, 2023). This forms the population for this study.

Sample Size Determination

To determine the sample size for this study, the Krejcie and Morgan's table (Krejcie & Morgan, 1970) was used. Since the study population is 230,458 internally displaced persons, using the table, a sample of 384 internally displaced persons was drawn for the study.

Sampling Technique

This study adopted Multi-Stage Sampling technique to draw the participants. 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 this population (IDPs) exists in diverse camps which were taken into consideration. At the second stage, simple random sampling was used where each stratum was randomly sampled using secret balloting for the study. The various strata that eventually constituted the sample are as seen below:

Guma ($138291/230458$) $\times 384 = 230.427 \sim 230$

Makurdi ($35311/230458$) $\times 384 = 58.837 \sim 59$

Gwer West ($56856/230458$) $\times 384 = 94.736 \sim 95$

Hence, using the above illustrated strata, a sample of 384 internally displaced persons was randomly drawn for the study.

Participants

The participants for this study were 384 internally displaced persons in Benue State. They comprised of 152 (39.6%) males and 232 (60.4%) females. Their ages ranged from 26-52 years with a mean age of 36.801 years ($SD=9.634$). Among them, 331 (86.2%) were Tiv while 53 (13.8%) were from other ethnic groups. In terms of their religion, 307 (79.9%) were Christians while 77 (20.1%) were practicing other religions. Concerning their educational level, 155 (40.4%) had primary education, 158 (41.1%) had secondary education, and 71 (18.5%) had tertiary education. As for their durations in IDP camps, 104 (27.1%) were there for less than a year, 204 (53.1%) were there for 1-10 years while 76 (19.8%) were there for over 10 years.

Instruments

Emotional Abuse Scale: Emotional abuse was measured using the Emotional Abuse Scale developed by Goodall and Sawrikar (2023). The scale is meant to measure emotional abuse among adolescents and adults. The scale has 23 items measured on a 5-point format of 0 (never) to 4 (A great deal). The scale has two dimensions; Direct Abuse (items 1-13) and Covert Abuse (items 14-23). The total score is obtained by summing scores across the items for each subscale. The author reported .93 and .97 for the subscales respectively while the overall scale had .98. The present study reported .88 while the subscales had .84 and .80 for the direct abuse and covert abuse subscales. Sample of items include; “Put you down or criticize you in front of others”, “Lose their temper without warning”.

Self-Regulation Questionnaire: Self-regulation was measured using the Self-Regulation Questionnaire developed by Hrbackova and Vavrova (2014). The questionnaire was developed to measure the level of self-regulation among adults. The scale is measured on a 5-point format of 1 (strongly disagree) to 5 (strongly agree). The 13-item scale has three dimensions; Affect (items 1-4), Awareness (items 5-9) and Empowerment (items 10-13). The total score is obtained by summing an individual scores across all the items. The author obtained an alpha coefficient of .73 for the overall scale, while the subscales had .81, .71 and .73 for the subscales respectively. The present study reported an alpha coefficient of .83 and .78, .78 and .81 for the affect, awareness and empowerment subscales. Sample of items include: “I can cheer myself up when sad”, “I get upset every time things are not my way”.

Warwick-Edinburgh Mental Wellbeing Scale: Mental health was measured using the Warwick-Edinburgh Mental Well-being Scale developed by WAVES project (2010). This 14-item scale is uni-dimensional and is measured on a 5-point scale of 1 (none of the time) to 5 (all of the time). High scores on this scale imply good mental health while low scores imply poor mental health. The scale has a reliability coefficient of .87 as reported by the author. The present study obtained an alpha coefficient of .75. There are no items to be reversed and a sample of the items in this scale include; “I have been thinking clearly”, “I have been feeling confident”.

Procedure

This study was carried out among internally displaced persons in selected camps in Benue State. The researchers sought approval from the Benue State Emergency Management Agency to carry out the study in IDP camps. Upon obtaining approval, the researchers proceeded and sought the consents of the respondents and assured them of data confidentiality in each of the targeted camps. They were also assured that the study would not constitute any form of harm to them. Those whose consents were obtained were given a copy of the questionnaire to fill and submit. The administration process carried out in 2 weeks. They were trained to get familiar with the instruments. The instruments were administered directly at the camp on one-to-one basis. After administering 390 copies, only 384 copies representing 98.5% return rate were considered for data analysis using SPSS v20.

Data Analysis

The data collected in this study was analyzed using both descriptive and inferential statistics. The researchers used mean, standard deviation, frequencies and percentages to describe the attributes of the participants. On the other hand, Multiple linear regression was used to test

Hypothesis I, and hypothesis II, while Standard Multiple regression was used to test Hypothesis III.

Results

Table 1: Summary of Multiple Linear Regression showing the influence of emotional abuse on psychological health among internally displaced persons in Benue State.

Variables	R	R ²	F	df	β	t	sig.
Constant	.703	.494	839.323	2,381		160.485	.000
Direct Abuse					-.305	-18.543	.000
Covert Abuse					-.223	-11.440	.000

The result presented in table 4.1 indicated that there was a significant negative influence of emotional abuse on psychological health among internally displaced persons [$R^2=.494$, $F(2,381)=839.323$, $p<.001$]. The result further indicated that emotional abuse explained 49.4% of the variation in psychological health. As for the dimensions, both direct abuse ($\beta=-.305$, $t=-18.543$, $p<.001$) and covert abuse ($\beta=-.223$, $t=-11.440$, $p<.001$) negatively predicted psychological health among internally displaced persons. Thus, hypothesis one was supported.

Table 2: Summary of Multiple Linear Regression showing the influence of self-regulation on psychological health among internally displaced persons in Benue State.

Variables	R	R ²	F	df	β	t	sig.
Constant	.676	.457	2579.990	3,380		16.382	.000
Affect					.770	17.966	.000
Awareness					.447	15.247	.000
Empowerment					.431	13.637	.000

The result presented in table 2 indicated that there was a significant influence of self-regulation on psychological health among internally displaced persons [$R^2=.457$, $F(3,380)=2579.990$, $p<.001$]. The result further indicated that self-regulation explained 45.7% of the variation in psychological health. In terms of the dimensions, the result indicated that the dimensions; Affect ($\beta=.770$, $t=17.966$, $p<.001$), Awareness ($\beta=.447$, $t=15.247$, $p<.001$), and Empowerment ($\beta=.431$, $t=13.637$, $p<.001$) made significant positive contributions to psychological health among internally displaced persons. Thus, hypothesis two was also supported.

Table 3: Summary of Standard Multiple Regression showing the joint influence of emotional abuse and self-regulation on psychological health among internally displaced persons in Benue State.

Variables	R	R ²	F	df	β	t	sig.
Constant	.744	.554	236.888	2,381		51.419	.000
Emotional Abuse					-.700	-19.735	.000
Self-Regulation					.130	3.652	.000

The result presented in table 3 indicated that there was a significant joint influence of emotional abuse and self-regulation on psychological health among internally displaced persons

[$R^2=.554$, $F(2,381)=236.888$, $p<.001$]. The result further indicated that both emotional abuse and self-regulation jointly explained 55.4% of the variation in psychological health. Thus, hypothesis three was also supported.

Discussion

Hypothesis one was tested to find out if emotional abuse will significantly influence psychological health among internally displaced persons in Benue State. Findings indicated that emotional abuse negatively influenced psychological health among internally displaced persons. Emotional abuse is characterized by actions aimed at emotionally humiliating and downgrading the integrity of a person. When someone is emotionally abused, the consequences may include low self-esteem, anger, worries and distress. Therefore, it is common for emotionally abused persons to experience poor psychological health states. This finding agrees with Scott et al. (2023) who revealed that the prevalence of mental disorders in non-maltreated participants was 21.6% and increased to 36.2% for those who experienced a single type of maltreatment and 54.8% for participants who experienced multi-type maltreatment. The psychological health conditions include generalized anxiety disorder, major depressive disorder, severe alcohol use disorder, and post-traumatic stress disorder. Furthermore, the associations between the experiences of maltreatment and mental disorders were strongest for sexual abuse, emotional abuse and multi-type maltreatment. Also, another author, Barros et al. (2022) found that emotional abuse influenced mental health. The results further provided evidence that early trauma has an important impact on mental health, increasing the risk of depression. Similarly, Aye et al. (2021) found that positive associations exist between childhood abuse with adult mental distress and PTSD symptoms.

Hypothesis two was tested to find out if self-regulation will significantly influence psychological health among internally displaced persons in Benue State. Findings indicated that self-regulation positively influenced psychological health among internally displaced persons. Self-regulation is characterized by the ability to modulate one's emotions, thoughts and behaviours in relation to external demands. It involves adjusting oneself to their immediate environment. It is likely that if internally displaced persons have self-regulation skills, they can manage their emotional reactions to demands around them and this will in the long-run help to maintain their psychological health. This finding thus agrees with Mojsa-Kaja and Ivcevic (2023) who found direct and indirect effects of emotion regulation strategies on depression, anxiety, and stress. More so, Li et al. (2023) they found that expressive suppression has positive effects on mental health in adulthood. In addition, Hajifathali et al. (2021) found a negative correlation between self-regulating, depression, and anxiety. They concluded that integrative self-knowledge, mindfulness, and self-control as self-regulating components correlated to mental health. Also, Aali et al. (2021) found that positive refocusing and planning have positive significant relationships with quality of life and mental health. Later studies by Davis and Hadwin (2021) and Kraiss et al. (2020) showed significant small to moderate negative relationships with well-being for the strategies avoidance and rumination and positive relationships with reappraisal and acceptance. Their findings revealed that overall deficits in emotion regulation showed a negative moderate correlation with well-being.

Hypothesis three was tested to find out if emotional abuse and self-regulation will jointly influence psychological health among internally displaced persons in Benue State. Findings indicated that emotional abuse and self-regulation jointly influenced psychological health among internally displaced persons. This finding agrees with Zhou and Zhen (2022) who found that physical abuse had direct positive effects on problematic behaviours but not on depression. However, emotional abuse had direct effects on depression and problematic behaviours, and

indirect effects on both psychopathologies through expressive suppression and anger. Similarly, Pomerantz (2019) and Kaiser and Malik (2015) found that emotional maltreatment and emotion regulation are significant predictors of mental health.

Recommendations

Based on the findings obtained from the present study, the researchers have made the following recommendations:

- i. The government of Benue State should set up secondary healthcare psychiatric facilities for internally displaced persons who are experiencing moderate to severe emotional abuse and psychological health challenges which should be free of charge. This initiative will augment the counselling support offered by NGOs in IDP camps which is just but an aspect of the minimum service package. This effort will reduce the impact of the emotional abuse faced by internally displaced persons post displacement.
- ii. Experts in clinical psychology should develop clinical training packages for self-regulation for adolescent and adults who are displaced. The training will help to rebuild internally displaced persons' self-regulation skills which in turn is capable of enhancing their positive psychological health.
- iii. The ministry of women affairs and social development should collaborate with the Benue State Emergency Management Agency to identify emotionally abused internally displaced persons and those who lack self-regulation skills and support them under the social welfare scheme. This effort will address the psycho-emotional needs of internally displaced persons in the Benue State.

Contributions to Knowledge

The contributions of this study to knowledge cannot be over-emphasized here. The pertinent contributions made by this study are as follows:

- i. This study has produced additional evidence to the psychological health needs of internally displaced persons in Benue State. This study illustrated linkages between emotional abuse and self-regulation to the psychological health of internally displaced persons.
- ii. The study also bridged the gap in data and literature which is required for policy makers, agencies, the government and other humanitarian bodies to base their decisions to initiate support to internally displaced persons in Benue State.

REFERENCES

- Aali, S., Khoshkhui, M. & Rafizadeh-Ardabili, G. (2021). Role of Cognitive Emotion Regulation Strategies on Mental Health and Quality of Life in Allergic Patients. *International Journal of Behavioural Sciences*, 14(4), 211-216. <https://doi.org/10.30491/ijbs.2020.220682.121>
- Adikwu, V., Edache, J. J., Iji, M. & Ogar, E. (2021). Emotional Abuse and Mental Health of Women in Abusive Marriage in Communities in Gwagwalada, Federal Capital. *Mattawang: Jurnal Pengabdian Masyarakat*, 2(1), 36–45.
- Al-Shail, E., Hassan, A., Aldowaish, A. & Kattan, H. (2022). The cultural Reinforcers of child abuse. *Child Abuse and Neglect – A Multidimensional Approach*, 1(5), 8-10.
- Barros, P., Assar, R., Botto, A., Leighton, C., Quevedo, Y. & Jimenez, J. P. (2022). The Effect of Child Trauma on the Relation between Psychological Well-Being and Depressive Symptoms in Chilean University Students. *Healthcare*, 10, 24-63. <https://doi.org/10.3390/healthcare10122463>
- Buckley, J., Cohen, J. D., Kramer, A. F., McAuley, E., & Mullen, S. P. (2019). Cognitive control in the self-regulation of physical activity and sedentary behavior. *Frontiers in Human Neuroscience*, 8, 747. <https://doi.org/10.3389/fnhum.2014.00747>
- Crowe, S. F., Matthews, C., & Walkenhorst, E. (2017). Relationship between worry, anxiety and thought suppression, and the components of working memory in a non-clinical sample. *Australian Psychologist*, 42, 170–177. <https://doi.org/10.1080/00050060601089462>
- Durosaro I. A. & Ajiboye S. K. (2021). Problems and coping strategies of internally displaced adolescents in Jos metropolis, Nigeria. *International Journal of Humanities and Social Science*, 1(20), 256 – 262
- Ekezie, W., Siebert, P., Timmons, S., Murray, R. L. & Bains, M. (2022). Exploring the influence of health management processes on health outcomes among internally displaced persons (IDPs). *Journal of Migration and Health*, 2(2), 234-244. <https://doi.org/10.1016/j.jmh.2022.100124>.
- Ginis, K. A. M., & Bray, S. R. (2020). Application of the limited strength model of self-regulation to understanding exercise effort, planning, and adherence. *Psychology and Health*, 25, 1147–1160. <https://doi.org/10.1080/08870440903111696>
- Goodall, K., & Sawrikar, V. (2023). The Rating of Emotional Abuse in Childhood (REACH) Questionnaire: A new self-report measure assessing history of childhood emotional abuse. *Journal of Abuse*, 3(1), 33-45. <https://doi.org/10.31234/osf.io/6czef>
- Hajifathali, F., Ghorbani, N. & Rostami, R. (2021). The Relationship Between Integrative Self-Knowledge, Mindfulness, Self-Control, and Mental Health Parameters. *Propósitos y Representaciones*, 9, 45-49.
- Hrbackova, K., & Vavrova, S. (2014). The Development and Validation of the Self-Regulation Questionnaire in Children and Minors. *Procedia–Social and Behavioural Sciences*, 112, 730-737. <http://dx.doi.org/10.1016/j.sbspro.2014.01.1224>
- Kaiser, A., & Malik, S. (2015). Emotional Maltreatment as Predictor of Mental Health Problems among Adolescents: Moderating Role of Optimism. *Journal of Behavioural Sciences*, 25, 129-132.
- Kaiser, B., Ticao, C., Boglosa, J., Minto, J., Chikwiramadara, C., Tucker, M. & Kohrt, B. (2019). Mental health and psychosocial support needs among people displaced by Boko Haram in Nigeria. *Global Public Health*, 15, 1-14. <http://doi.org/10.1080/17441692.2019.1665082>.
- Moffitt, T., Arseneault, L., Belsky, D., Dickson, N., Hancox, R., Harrington, H., Houts, R., Poulton, R., Roberts, B., Ross, S., Sears, M., Thomson, W. & Caspi, A. (2021). A Gradient of

- Childhood Self-Control Predicts Health, Wealth, and Public Safety. *Proceedings of the National Academy of Sciences of the United States of America*, 108, 2693-2698. <https://doi.org/10.1073/pnas.1010076108>.
- Mojša-Kaja, J., & Ivcevic, Z. (2023). Emotion regulation strategies and mental health symptoms during COVID-19: the mediating role of insomnia. *International Journal of Occupational Medicine and Environmental Health*, 36(1), 151–159. <https://doi.org/10.13075/ijomeh.1896.01977>
- Morina, N., Akhtar, A., Barth, J. & Schnyder, U. (2018). Psychiatric Disorders in Refugees and Internally Displaced Persons After Forced Displacement: A Systematic Review. *Frontiers in Psychiatry*, 9, 433-454. <https://doi.org/10.3389/fpsyt.2018.00433>
- Nezlek, J., Wesselmann, E., Wheeler, L. & Williams, K. (2022). Ostracism in Everyday Life. *Group Dynamics: Theory, Research, and Practice*, 16, 91-104.
- Palusci, V. J., & Ondersma, S. J. (2022). Services and recurrence after psychological maltreatment confirmed by child protective services. *Child maltreatment*, 17(2), 153–163. <https://doi.org/10.1177/1077559511433817>
- Pomerantz, H. E. (2019). "Childhood emotional maltreatment and anxiety: the effect of engaging in a healthy lifestyle". Open Access Master's Theses. Paper 1490. <https://digitalcommons.uri.edu/theses/1490>
- Qasim, A. & Muzaffar, R. (2021). Emotional Abuse as a Predictor of Mental Health Problems among Married Individuals and its impact on their Quality of Life. *Asian Journal of Social Sciences and Management Studies*, 8(4), 92-101.
- Scott, J. G., Malacova, E., Mathews, B., Haslam, D. M., Pacella, R., Higgins, D. J., Meinck, F., Dunne, M. P., Finkelhor, D., Erskine, H. E., Lawrence, D., & Thomas, H. J. (2023). The association between child maltreatment and mental disorders in the Australian Child Maltreatment Study. *The Medical journal of Australia*, 3(1), 31-43.
- Siriwardhana, C., & Stewart, R. (2023). Prolonged internal displacement and common mental disorders in Sri Lanka: The COMRAID study. *PLoS ONE*, 8(5), 23-43. <https://doi.org/10.1371/journal.pone.0064742>
- Tanaka, H., Black, J. M., Hulme, C., Stanley, L. M., Kesler, S. R., Whitfield-Gabrieli, S., Reiss, A. L., Gabrieli, J. D., & Hoeft, F. (2021). The brain basis of the phonological deficit in dyslexia is independent of IQ. *Psychological Science*, 22(11), 1442–1451. <https://doi.org/10.1177/0956797611419521>
- WAVES Project (2010). *Warwick-Edinburgh Mental Well-being Scale (WEMWBS) acceptability and validation in English and Scottish secondary school Students*. NHS Health Scotland, Woodburn House, Canaan Lane, Edinburgh.
- World Health Organization (2023). *Mental Health: Strengthening our response*. World Health Organization. <http://www.who.int/mediacentre/factsheets/fs220/en/>
- Zhou, X., & Zhen, R. (2022). How do physical and emotional abuse affect depression and problematic behaviours in adolescents? The roles of emotional regulation and anger. *Child Abuse & Neglect*, 129, 105-141. <https://doi.org/10.1016/j.chiabu.2022.105641>