

Effect of Group Counselling on the Psychological Adjustment of People Living in Internally Displaced Camps in Sokoto State, Nigeria

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Abstract

The study investigated effect of group counselling on the psychological adjustment of internally displaced persons in Sokoto State. The study was guided by four (4) objectives, four (4) research questions and four (4) null hypotheses. The study was limited to IDP camps in Sokoto Central Senatorial Zone in Sokoto State. The study adopted quasi-experimental research Design. The population of the study consists of the entire 80,615 internally displaced persons in Sokoto Central Senatorial District. Convenience sampling technique was employed in selecting 80 participants to serve as experimental and control group. Adapted version of Tobin (2015) Coping Strategies Questionnaire (CSQ) was used as instrument for data collection. The reliability of the instrument was obtained using test and re-test method and reliability index of 0.78 was obtained. The findings shows that, there is significant difference on adjustment to loss between subjects exposed to group counselling and those in the control group, there is significant difference on adjustment to trauma between subjects exposed to group counselling and those in the control group, there is significant difference on adjustment to mental health between subjects exposed to group counselling and those in the control group. The study recommended that, Federal Government should provide trauma-informed care, taking into consideration the unique experiences and challenges faced by internally displaced persons.

Keywords: Psychological Adjustment, Group Counselling, Effect, IDP camps, Trauma

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Introduction

There is a growing trend of insecurity, attacks and displacement of persons in certain parts of the Nigeria. This situation in Nigeria and especially, Sokoto state has been acute in the last decade. Several factors accounts for internal displacement of persons, a phenomenon in which individuals are forced to leave their homes but remain within the borders of their own countries. The consequences of displacement on social, emotional, physical and educational development of individuals are humongous. The impact of displacement on some affected individuals in IDP camps revealed anxiety as the major challenge (Katniyon & Liyas, 2021). Most of the pupils affected by conflict are terrified by the horror they witnessed in the crisis as well as fear for the future. Others find it difficult to cope with the new environment especially due to poor living conditions and poor feeding conditions among other factors. All these challenges lead to serious cases that result to psychological maladjustment among them.

United Nations High Commission for Refugees (UNHCR 2022) defines internally displaced people (IDPs) as those who have not crossed a border to find safety. Unlike refugees, they are on the run at home. IDPs stay within their own country and remain under the protection of its government, even if that government is the reason for their displacement. They often move to areas where it is difficult for us to deliver humanitarian assistance and as a result, these people are among the most vulnerable in the world. Over the past decade, the global population of forcibly people living in internal displacement around the world grew substantially from 43.3 million in 2009 to 70 million in 2018 and surge to 59.1 million at the end of 2021(Geneva, 2022). In the same vein, unprecedented figure of new waves of violence and protracted conflict in countries ranging from Ethiopia and Afghanistan to Syria and the Democratic Republic of the Congo (DRC).

Internal Displacement Monitoring Centre (IDMC)'s annual global report (2022) shows that 38 million internal displacements, or movements, were reported during 2021, the second highest annual figure in a decade after 2020's record-breaking year for disaster displacement. The report further indicates that conflict and violence triggered 14.4 million movements, an increase of almost 50 per cent on the year before. Sub-Saharan Africa was the most affected region, with more than five million displacements in Ethiopia alone,

the highest figure ever for a single country. In Africa, 12 million people were displaced by armed conflict and violence (World Bank, 2021).

In Nigeria 376 persons were displaced internally as a result of conflict and violence at the end of 2021 (World Bank, 2021). Sokoto State is faced with different banditry activities resulting to internal displacement of individuals within the state. As of 2006, it has a population of over 3.7 million. Sokoto is the modern-day capital of [Sokoto State](#) and was previously the capital of the north-western states. Modern Sokoto is known for trading sheep skins, cattle hides, leather crafts (a significant expert) kola nuts and goat skins, made up of two ethnic groups namely Fulani and Hausa. Sokoto town, the capital of Sokoto State has a population of approximately of 2.5 million. Apart from Hausa and Fulani there are the Zabarmawa and Tuareg minorities in the local government border areas. All these groups speak Hausa as a common language. Fulfulde is spoken by the Fulani. Sokoto is a major city located in extreme north-western Nigeria, near the confluence of the Sokoto River and the Rima Rivers.

Nigeria grapples with curtailing the various violent conflicts across the nation. The North West region of the country is notorious for bandit activities, and one of the states in the region that is affected is the “Seat of the Caliphate”, Sokoto state. According to the Nextier Violent Conflict Database for 2023, Sokoto state has recorded incidents of banditry, gunmen attacks, extra-judicial killings and communal clashes. However, banditry remains the most predominant violent conflict in Sokoto State, with eleven incidents, 25 kidnap victims and 45 casualties (deaths and injuries) between 1st August 2023 and 4th December 2023. The seemingly unending attacks by bandits in an incident on 3rd December 2023 led to the death of seven and the abduction of several others in the Goronyo and Wurno Local Government Area of Sokoto State.

According to World Health Organization (2021), reported that in 2019, and one in every 8 people, or 970 million people around the world were living with a mental disorder, with anxiety and depressive disorders as the most common mental health challenges. Initial estimates show a 26% and 28% increase respectively for anxiety and major depressive disorders in just one year while effective prevention and treatment options exist, most people with mental disorders do not have access to effective care. Many people also experience stigma, discrimination and violations of human rights. Most of the

internally displaced persons of armed banditry experience different forms of mental health disorder due to the violation of their human right, depression and anxiety are the most common mental health problems. The fear of losing their ancestral home and farm lands, the uncertainty of their safety on return home all develop anxiety and depression conditions, (Muhammad et al. 2023).

According to the World Health Organization (2021), one in every five people living in war-affected areas has a mental health problem, with a prevalence of 22.1%. Both males and females have to suffer losses of their houses, jobs, income, livestock, agriculture and business during conflicting situation. Due to any physical disability many men feel powerless. Although they were physically present in the house, they were unable to work. So they feel ashamed that they can't send their children to school for their better future and unable to fulfil their responsibility. Females also suffer from economic crises because their responsibilities suddenly increased. They feel that after the loss or injury of their husbands due to the conflict they have to play the role as both mother and father for their children.

Schäfer et al. (2023) examined transdiagnostic psychosocial interventions among forcibly displaced persons and found some evidence favouring interventions for adults, although the researchers described the certainty of evidence as very low. Their findings indicate that interventions designed to develop coping and other psychological skills may be useful, but that differences among displaced populations and intervention approaches need to be taken into consideration.

Psychological adjustment refers to the ability of an individual to cope effectively with stressful circumstances and maintain relatively healthy emotional, social and behavioural functioning. For IDPs, psychological adjustment may be particularly difficult because displacement frequently involves exposure to multiple stressors before, during and after displacement. These may include experiences of violence, loss of family members or property, separation from social networks, disruption of education and employment, overcrowding and uncertainty about the future. Such experiences may manifest in anxiety, depression, post-traumatic stress symptoms, social withdrawal and difficulties in interpersonal relationships and reduced ability to cope with everyday challenges.

Recent research provides evidence that psychosocial interventions can contribute to improved wellbeing among forcibly displaced populations. Tay

et al. (2023), in a systematic review and meta-analysis involving 162 reports, found a moderately strong overall effect of psychosocial interventions on psychosocial wellbeing. However, the researchers also observed that the evidence was mixed and that many studies relied on weaker research designs. This suggests the need for additional controlled studies that can establish more clearly whether particular interventions are responsible for improvements in the adjustment and wellbeing of displaced persons.

Internally displaced persons (IDPs) are individuals or groups who have been forced or obliged to leave their homes or places of habitual residence as a result of armed conflict, generalized violence, human-rights violations, disasters or other circumstances, but who have not crossed an internationally recognized state border. Internal displacement can have profound psychological and social consequences because displaced individuals often lose their homes, livelihoods, social networks, possessions and sense of security. Beyond the immediate experience of displacement, prolonged uncertainty, poverty, insecurity and inadequate living conditions can create continuing psychological stress. Dickson et al. (2024) noted that displacement has an ongoing negative effect on mental health and that a large proportion of displaced populations are located in low- and middle-income countries where access to mental-health services remains limited.

World Health Organization (WHO, 2026) defined stress as a state of worry or mental tension resulting from a difficult or challenging situation. It is a natural human response that helps individuals respond to perceived challenges and threats. However, excessive or persistent stress can negatively affect psychological and physical well-being. Stress refers to the physiological or psychological response to internal or external stressors. It involves changes in the body and mind that can influence how a person feels and behaves, American Psychological Association (APA, 2025). Stress can therefore be understood as the psychological and physiological reaction of an individual to demands, pressures, or challenging circumstances that are perceived as exceeding, or potentially exceeding, the person's available coping resources.

Kirsch et al. (2024), defined trauma as a disturbing experience that produces intense fear, helplessness, confusion, or other disruptive emotions and is sufficiently severe to have a lasting negative effect on an individual's attitudes, behaviour, or functioning. The APA's 2025, guidelines on psychological trauma further describe trauma as an event that exceeds an individual's

capacity to cope or creates a significant disruption in attachment and is severe enough to interfere with daily functioning. The Canadian Public Health Agency's 2023, defined psychological trauma as an experience during an event that is sufficiently distressing to overwhelm an individual's emotional capacity; it also distinguishes trauma from ordinary stressful experiences, since not every stressful experience is traumatic. Trauma can therefore be defined as the psychological and emotional impact of an exceptionally distressing or overwhelming event that exceeds an individual's ability to cope and subsequently interferes with normal emotional, social, or psychological functioning.

Maladjustment refers to an individual's inability to maintain effective relationships, function successfully across important areas of life, or cope adequately with difficulties and stress. Recent research by Raccanello et al. (2023) conceptualizes psychological maladjustment in relation to difficulties in coping and adjustment following stressful experiences such as natural disasters. Their meta-analysis examined maladjustment and adjustment among children and adolescents exposed to disasters. Similarly, Greene, (2024) describes adjustment difficulties as maladaptive responses to stressors or traumatic experiences that can result in impairment in functioning. Psychological maladjustment can therefore be defined as a state in which an individual experiences persistent emotional, behavioural, social, or psychological difficulties that interfere with effective coping, relationships, and normal functioning in response to stressful or challenging circumstances.

The UNHCR (2022), maintains that IDPs are entitled to enjoy the same rights and freedoms under international and national laws as do other people in their country. Some of the typical needs and protection risks that arise in internal displacement include family separation, loss of documentation, freedom of movement in and out of camps, loss of property, and further exposure to the risk of secondary or onward displacement. To the UNHCR (2022), achieving a durable solution to internal displacement means that IDPs no longer have any specific assistance and protection needs that are directly linked to their displacement and can enjoy their human rights without discrimination on account of their displacement. Attaining a durable solution to internal displacement is a process that can be achieved through sustainable integration of counselling.

According to Kirsch et al. (2024), group counselling is one potentially valuable approach to addressing the psychological difficulties experienced by IDPs. Unlike individual counselling, group counselling brings individuals experiencing similar challenges together under the guidance of a trained counsellor. Through structured interaction, participants can express their concerns, receive emotional support, learn coping strategies, develop interpersonal skills and recognize that others have experienced similar difficulties. The group environment may therefore reduce feelings of isolation and promote social connectedness, which are important components of psychological adjustment.

Recent evidence specifically supports the potential value of group-based interventions among displaced populations. Kirsch et al. (2024), in a systematic review of group-based interventions for refugees, reported improvements in mental-health outcomes, including symptoms associated with post-traumatic stress, depression and anxiety. The authors also emphasized the importance of culturally grounded approaches and recommended further research into the long-term effects of group interventions. Although the review focused mainly on refugees rather than IDPs, its findings provide relevant evidence for investigating group counselling as an intervention for people affected by forced displacement.

Group counselling is a therapy carried out between a therapist and a group of people sharing the same problem or condition. The composition of the group is usually four (4) to ten (10) people. The leader of the group is trained psychotherapist. Group therapy is a process using group interaction to facilitate understanding and self-acceptance of individuals in a group. Member of the group are not randomly selected. Group counselling can promote individuals to know themselves through observation, learning and experience in group communication. Group counselling can develop a good life adaptation process by adjusting and improving relationships with others, learning new attitudes and behaviors. As a kind of psychological counselling, group counselling can not only treat some special groups' psychological problems to a certain extent, but also effectively help normal people to prevent various psychological problems. Group counselling can correct people's unreasonable beliefs through cognitive reconstruction. It can also teach people problem-solving strategies and behavioral skills.

Problem Statement

Insecurity has become a common and daily experience in some parts of Sokoto state. The continuous vulnerability of people affected with both psychosocial and psychological problems due to armed bandits' activities in the state has become an important issue that needs to be addressed. The affected local government areas in terms of insecurity in the state are nine (9) which include Rabah, Sabon Birni, Isa, Illela, Tangaza, Tureta, Kebbe, Gudu and Gada local governments of Sokoto state, these local governments are seriously affected and their people are in traumatize condition.

Adjustment is a behavioural process by which a person maintains balance among various needs that one encounter at a given point of time. It is a process of altering behavior to reach a harmonious relationship with environment. Therefore, looking at this definition we can conclude that the Internally displaced persons will find it very difficult to curb with their new environment, looking at the fact that their already furnished and existing houses were taken away from them due to insecurity living them currently so congested.

Majority of programmes for IDPs, particularly in low-and middle-income countries, focus on physical interventions rather than psychological support. On 4-march-2024, the Sokoto State Government constituted an eight man committee to chair the distribution of grains to the people in IDP camps of sokoto state. Both government and NGOs focuses mainly on distribution of relief items living behind the psychological problems this people usually indulge into. It is against this background that the study set to investigate the effect of group counselling on the psychological adjustment of internally displaced persons in IDPs camps in Sokoto State.

Objectives of the Study

The objectives of the study are:

1. To determine the effect of group counselling on adjustment to stress among the internally displaced persons in IDP camps of Sokoto state.
2. To determine the effect of group counselling on adjustment to trauma among the internally displaced persons in Sokoto state.

3. To determine the effect of group counselling on social adjustment among the internally displaced persons in Sokoto state.
4. To determine the effect of group counselling on mental health adjustment among the internally displaced persons in Sokoto state.

Research Questions

To guide the study, the following research questions were raised:

1. What is the effect of group counselling on adjustment to stress among the internally displaced persons in IDP camps of Sokoto state?
2. What is the effect of group counselling on adjustment to trauma among the internally displaced persons in Sokoto state?
3. What is the effect of group counselling on social adjustment among the internally displaced persons in Sokoto state?
4. What is the effect of group counselling on mental health adjustment among internally displaced persons?

Research Hypotheses

In order to find out the relationship between the variables involved in the study, the following null hypotheses were formulated:

H₀₁. There is no significant difference in adjustment to stress on subjects exposed to group counselling and those that are not exposed to group counselling in IDP camps.

H₀₂. There is no significant difference in adjustment to trauma on subjects exposed to group counselling and those that are not exposed to group counselling in IDP camps.

H₀₃. There is no significant difference in social adjustment of subjects exposed to group counselling and those that are not exposed to group counselling in IDP camps.

H04. There is no significant difference in mental health adjustment of subjects exposed to group counselling and those that are not exposed to group counselling in IDP camps.

Methodology

The research design used for this study is quasi-experimental research design pre-test/ post-test research design. It involves the randomization and control of variables in the study and the administration of instrument to measure the effect of manipulation of variables across the groups. The scheduled is given below:

Table 1

Representation of the Research Design

Group	Pre-test	Treatment	Post-test
Experimental group	01	Q ₁	04
Control group	02		05

Source: Fieldwork, 2026

Key

01 = Experimental group

02 = Control group

Q₁= Group Counselling

Q₂= No treatment

The population of this study was three hundred and twenty-nine thousand one hundred and eleven (329,111) male and female Internally Displaced Persons in Sokoto State (SEMA 2025). The data of the population is given in table:

Table 2

Summary of IDPs Data IN 23 LGAs of Sokoto State

S/n	Zone	Total House Hold	Total Population
1.	Sokoto East (Isah, Sabon-Birni, Rabah)	37,040	224,556
2.	Sokoto Central (Sokoto South, Sokoto North, Silami, Wamakko, Tangaza, Gudu and Binji)	13,050	80,615
3.	Sokoto South (Kebbe, Tambuwal, Shagari,	3,990	23,940

Yabo, Bodinga, Tureta and Dange Shuni)		
Total	54,080	329,111

Source: SEMA, Sokoto 2026.

Convenience sampling method was applied in selecting eighty (80) respondents to serve as experimental and control groups across the four selected areas. This is because according to Williams, (2017); and Ishaka, (2021), a counselling group should consist of a relatively small number of peoples usually 3 - 20 persons. In line with this a sample of Eighty (80) internally displaced persons were sampled for the study corresponding to forty (40) treatment group and forty (40) control group respectively. The distribution is given below

Table 3

Sample Distribution for Pre-test and Post-test

S/N	Camp	Treatment group Sample	Control Group Sample	Sample Size
1.	Ramin kura	10	10	20
2.	Guiwa Eka	10	10	20
3.	Mana/More	10	10	20
4.	Kalambaina/Girafshi	10	10	20
Total		40	40	80

Adapted version of Tobin (2015) Coping Strategies Questionnaire (CSQ) was used as instrument for data collection. The instrument was validated by experts in the Department of Educational Foundations at Usmanu Danfodiyo University Sokoto as well as Sokoto State University, Sokoto. The reliability was obtained through administering the instrument to eighty (80) internally displaced persons outside the sampled camps who have the same characteristics with main population of the study, after two weeks' interval, it was re-administered to the same internally displaced persons. The result of the two sets of scores was subjected to correlation using Pearson Product Moment Correction Co-efficient (PPMCC) statistical tool and reliability index of 0.82 was obtained.

For data collection procedure, two major groups were formed that include the treatment group and the control group. Group members were selected taking

into consideration the age, gender and social class of the members, through the help of the camp leaders in order to make the sessions effective. The data collected was statically analysed using descriptive and inferential statistics. Descriptive Statistics was used to answer all research questions using simple frequency count, mean and Standard deviation for analysis, independent samples t-test was used to test all null hypotheses formulated for the study.

Results

Null Hypotheses One (H₀₁): There is no significant difference in adjustment to stress on internally displaced persons exposed to group counselling and those that are not exposed to group counselling.

This hypothesis was tested by subjecting the adjustment to stress post-test scores of internally displaced persons exposed to group counselling and those that are not exposed to group counselling to independent t-test analysis and result was presented in table 3 below.

Table 4

Independent T-Test of Post-Test Scores for the Difference in Adjustment to Stress on Internally Displaced Persons Exposed to Group Counselling and those that are not Exposed to Group Counselling

Group	N	Mean	Std. Deviation	t-Cal	df	P-value	Decision
Control	40	1.5063	.22988	-19.299	78	0.000	H ₀
Experimental	40	3.0250	.44144				Rejected

Source: Fieldwork, (2026) Sig level 0.05

The result of table 4, indicate based on the mean and standard deviation, there was a significant difference that exists between internally displaced persons exposed to group counselling (Mean = 3.0250, SD = .44144) and those in the control group (Mean = 1.5063, SD = .22988) is positive and significant, df (78) = -19.299, p = 0.000. Thus, the p -value is less than the 0.05 level of significance. Therefore, H₀₅ which states that there is no significant difference in adjustment to stress on internally displaced persons exposed to group counselling and those that are not exposed to group counselling was rejected. This indicated that there was a significant effect in adjustment to stress on internally displaced persons exposed to group counselling and those that are not exposed to group counselling.

Null Hypotheses Two (H₀₂): There is no significant difference in adjustment to trauma on internally displaced persons exposed to group counselling and those that are not exposed to group counselling.

This hypothesis was tested by subjecting the adjustment to trauma post-test scores of internally displaced persons exposed to group counselling and those that are not exposed to group counselling to independent t-test analysis and result was presented in table 5.

Table 5

Test Scores for the Difference in Adjustment to Trauma on Internally Displaced Persons Exposed to Group Counselling and those that are not Exposed to Group Counselling

Group	N	Mean	Std. Deviation	t-Cal	df	P-value	Decision
Control	40	1.5563	.29137	-17.737	78	0.000	H ₀
Experimental	40	3.0375	.44053				Rejected

Source: Fieldwork, (2026) Sig level 0.05

The result of table 5, indicate based on the mean and standard deviation, there was a significant difference that exists between internally displaced persons exposed to group counselling (Mean = 3.0375, SD = .44053) and those in the control group (Mean = 1.5563, SD = .29137) is positive and significant, df (78) = -17.737, p = 0.000. Thus, the p -value is less than the 0.05 level of significance. Therefore, H₀₆ which states that there is no significant difference in adjustment to trauma on internally displaced persons exposed to group counselling and those that are not exposed to group counselling was rejected. This indicated that there was a significant effect in adjustment to trauma on internally displaced persons exposed to group counselling and those that are not exposed to group counselling.

Null Hypotheses Three (H₀₃): There is no significant difference in social adjustment of internally displaced persons exposed to group counselling and those that are not exposed to group counselling.

This hypothesis was tested by subjecting the social adjustment post-test scores of internally displaced persons exposed to group counselling and those that are not exposed to group counselling to independent t-test analysis and result was presented in table 6.

Table 6

Independent T-Test of Post-Test Scores for the Difference in Social Adjustment of Internally Displaced Persons Exposed to Group Counselling and those that are not Exposed to Group Counselling

Group	N	Mean	Std. Deviation	t-Cal	df	P-value	Decision
Control	40	1.3875	.20373	-21.904	78	0.000	H ₀
Experimental	40	3.0563	.43665				Rejected

Source: Fieldwork, (2026) Sig level 0.05

The result of table 6, indicate based on the mean and standard deviation, there was a significant difference that exists between internally displaced persons exposed to group counselling (Mean = 3.0563, SD = .43665) and those in the control group (Mean = 1.3875, SD = .20373) is positive and significant, $df(78) = -21.904$, $p = 0.000$. Thus, the p -value is less than the 0.05 level of significance. Therefore, H_{07} which states that there is no significant difference in social adjustment of internally displaced persons exposed to group counselling and those that are not exposed to group counselling was rejected. This indicated that there was a significant effect in social adjustment of internally displaced persons exposed to group counselling and those that are not exposed to group counselling.

Null Hypotheses Four (H_{04}): There is no significant difference in mental health adjustment of internally displaced persons exposed to group counselling and those that are not exposed to group counselling.

This hypothesis was tested by subjecting the mental health adjustment post-test scores of internally displaced persons exposed to group counselling and those that are not exposed to group counselling to independent t-test analysis and result was presented in table 7.

Table 7

Independent T-Test of Post-Test Scores for the Difference in Mental Health Adjustment of Internally Displaced Persons Exposed to Group Counselling and those that are not Exposed to Group Counselling

Group	N	Mean	Std. Deviation	t-Cal	df	P-value	Decision
Control	40	1.4750	.27033	-17.193	78	0.000	H_0
Experimental	40	2.9063	.45180				Rejected

Source: Fieldwork, (2026) Sig level 0.05

The result of table 7, indicate based on the mean and standard deviation, there was a significant difference that exists between internally displaced persons exposed to group counselling (Mean = 2.9063, SD = .45180) and those in the control group (Mean = 1.4750, SD = .27033) is positive and significant, $df(78) = -17.193$, $p = 0.000$. Thus, the p -value is less than the 0.05 level of significance. Therefore, H_{08} which states that there is no significant difference in mental health adjustment of internally displaced persons exposed to group counselling and those that are not exposed to group counselling was rejected. This indicated that there was a significant effect in mental health adjustment of

internally displaced persons exposed to group counselling and those that are not exposed to group counselling.

Discussion

Hypothesis one found a significant effect in adjustment to stress of internally displaced persons exposed to group counselling and those that are not exposed to group counselling. This is in agreement with the findings of Mollica et al. (2017) that examined the impact of trauma-focused group counseling on displaced populations and found that participants exhibited significant improvements in emotional regulation and post-traumatic stress symptoms. Their study highlighted that peer support within group therapy created a safe space for emotional processing, reducing trauma-related distress. Similarly, Tol et al. (2018) conducted a meta-analysis on mental health interventions in conflict-affected populations and concluded that group counseling significantly enhanced trauma adjustment by promoting resilience and reducing emotional suppression. Further supporting this, Ehlers and Clark (2019) explored cognitive approaches to trauma recovery and found that guided group discussions helped displaced individuals reframe traumatic experiences, leading to better psychological adaptation. In a related study, Kohrt et al. (2020) investigated trauma interventions for refugees and found that structured group counseling facilitated emotional healing by fostering a sense of shared experience and collective coping mechanisms.

Hypothesis Two found a significant effect in adjustment to trauma of internally displaced persons exposed to group counselling and those that are not exposed to group counselling. This is in agreement with the findings of Humphreys, Thiessen & Blaney (2017) who highlighted that Group counseling lead to improved mental health outcomes, including reduced symptoms of anxiety, depression, and post-traumatic stress disorder (PTSD). Also, Silove et al. (2018) conducted a comprehensive review of mental health interventions in displaced populations and found that group counseling significantly reduced symptoms of anxiety, depression, and psychological distress. Their findings emphasized the therapeutic value of peer support and guided discussions in fostering emotional recovery. In a similar study, Ventevogel et al. (2019) explored mental health adjustment among refugees and found that participants in group counseling programs reported improved coping strategies and reduced psychological distress compared to those without intervention. Additionally, Purgato et al. (2021) conducted a

systematic review of psychological interventions in conflict-affected populations and concluded that group-based mental health programs significantly improved emotional stability and adaptive functioning among displaced persons.

Hypothesis Three found a significant effect in social adjustment of internally displaced persons exposed to group counselling and those that are not exposed to group counselling. This is in agreement with the findings of Priebe et al. (2020), who examined the long-term mental health outcomes of displaced individuals and found that structured group therapy enhanced psychological resilience, social connectedness, and overall well-being. Berry (2017) explored acculturation and social adaptation among displaced populations and found that group counseling provided a structured environment for learning social norms and building interpersonal relationships, which facilitated smoother social adjustment. Similarly, Putnam (2018) examined the role of social capital in displacement settings and concluded that participation in group therapy strengthened community bonds, reducing isolation and enhancing social well-being. Further evidence comes from Chatters et al. (2019), who investigated the impact of social support networks on psychological well-being and found that structured group discussions encouraged emotional expression, strengthened communication skills, and improved social relationships among displaced individuals. Additionally, Ventevogel et al. (2020) conducted a study on psychosocial interventions in refugee settings and reported that group counseling facilitated social reintegration by providing a platform for shared experiences and mutual support, ultimately enhancing social adjustment outcomes.

Hypothesis Four found a significant effect in mental health adjustment of internally displaced persons exposed to group counselling and those that are not exposed to group counselling. This is in agreement with the findings of McEwen and Gianaros (2018) that explored the neurobiological impact of chronic stress and found that structured interventions such as group counseling helped regulate stress responses by fostering resilience and emotional regulation. Their findings emphasized that participation in group therapy reduced cortisol levels and improved coping mechanisms among individuals exposed to prolonged stressors. Similarly, Hobfoll et al. (2020) conducted a study on displaced populations and found that group counseling sessions helped individuals develop cognitive reappraisal techniques, leading to improved stress tolerance and emotional stability. In a related study, Ungar

(2021) examined resilience-based interventions and concluded that structured group discussions enhanced problem-solving skills and self-efficacy, reducing the psychological burden of stress among displaced persons.

Conclusion

Based on the findings of the study, the following conclusions were made:

- i. There is significant difference on adjustment to stress between subjects exposed to group counselling and those in the control group.
- ii. There is significant difference on adjustment to trauma between subjects exposed to group counselling and those in the control group.
- iii. There is significant difference on social adjustment between subjects exposed to group counselling and those in the control group
- iv. There is significant difference on mental health adjustment between subjects exposed to group counselling and those in the control group.

Recommendations

Based on the findings of the study, the following recommendations were made:

1. Focus should be giving on enhancing coping self-efficacy and social self-efficacy among IDPs to improve their psychological adjustment.
2. Federal Government should provide trauma-informed care, taking into consideration the unique experiences and challenges faced by internally displaced persons.
3. There is need for increase in access to mental health services, thereby providing training and resources for counsellors and other mental health professionals.
4. Government and NGOs should support follow-up services and referrals for individuals who require additional mental support.

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