

EFFICACY OF COGNITIVE BEHAVIOURAL THERAPY (CBT) ON MENTAL HEALTH DISORDERS AMONG IN-SCHOOL ADOLESCENTS IN TARABA STATE, NIGERIA

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ABSTRACT

This study examined the efficacy of Cognitive Behavioural Therapy (CBT) on Mental Health Disorders among in-school adolescents in Taraba State, Nigeria. The study adopted quasi-experimental research design. The study was guided by two research questions and two null hypotheses were formulated and tested. The population of this study consisted of 16 Local Government Areas, 380 public secondary schools and 200,382 in-school adolescents in Taraba State. A sample of two hundred and forty-eight (248) in-school adolescents in two secondary schools was sampled for the study. A self-structured questionnaire coded, the "Mental Health Disorder Questionnaire (MHDQ) was used for the collection of data. Analysis of covariance (ANCOVA) was used to test the null hypotheses at 0.05 level of confidence. Based on the findings, the study concluded that there is a significant mean difference between experimental subjects and control subjects on post-test measures of substance use disorder and suicidal ideation disorder. Based on the findings it was recommended among others that substance abuse counsellors and school teachers should implement structured CBT intervention programs aimed at eradicating substance use disorders among in-school adolescents. Also that Counsellors and school administrators should implement structured CBT intervention programmes aimed at reducing suicidal ideation among students by integrating cognitive restructuring sessions into the school counselling framework.

Keywords: Cognitive Behavioural Therapy (CBT); Mental Health Disorders; In-school adolescents; Substance Use; Suicidal Ideation.

Introduction

Mental health crisis among adolescents is deepening across the globe. Behind school walls and teenage smiles, many young people grapple with emotional turmoil, anxiety, and behaviours that signal deeper psychological struggles. Mental health disorders among adolescents have reached alarming levels globally, with both developed and developing countries witnessing significant increases. In high-income countries like the United States, approximately 20% of adolescents are diagnosed annually with conditions such as anxiety, depression, and behavioural disorders (National Institute of Mental Health [NIMH], 2023).

The prevalence of mental health disorders among in-school adolescents in Taraba State, Nigeria, is a growing concern that necessitates urgent attention. Recent studies indicate a significant increase in the incidence of mental health issues such as anxiety, depression, and substance abuse among adolescents in this region (Adeoye, 2020; Nwoye, 2019). Factors contributing to this rise include academic pressure, socio-economic challenges, and exposure to traumatic events, which are prevalent in Taraba State (Okeke & Oladipo, 2021). Evidence from a cross-sectional survey conducted in 2022 among secondary school students in Jalingo, the state capital and other towns like Gembu, Zing and Wukari, revealed that approximately 35% of adolescents exhibited symptoms of mental health disorders, highlighting the urgent need for targeted interventions and mental health education (Usman, 2024).

Adolescence is a critical developmental period, marked by rapid physical, emotional, and social changes that can increase vulnerability to mental health disorders (Seekles, Twagira & Obasi, 2021). Unfortunately, when adolescents manifest symptoms of mental disorders, these signs are often misunderstood or dismissed as mere juvenile delinquency due to low mental health literacy and pervasive misconceptions about mental illness (Dedeke, Fakorede, Soyannwo, Osinubi, Adekambi & Ogundeyi, 2025). In many schools, affected students and their families are advised to seek spiritual interventions, traditional remedies, or, in rare cases, medical attention, reflecting broader cultural beliefs and inadequate access to professional mental health care (Oduguwa, Adedokun & Omigbodun, 2017). In extreme situations, students may be stigmatized, labeled as ‘witches,’ or even withdrawn from school, illustrating how cultural interpretations of mental health can amplify exclusion and distress (Dedeke et al., 2025). These societal misconceptions and inadequate support systems further exacerbate the mental health challenges faced by adolescents, highlighting the urgent need for evidence-based interventions such as CBT within school environments.

This vulnerability is evident in the range of mental health disorders affecting in-school adolescents in Nigeria, which include suicidal ideation, depression, Attention Deficit Hyperactivity Disorder (ADHD), substance abuse, eating disorders, and examination phobia (Adegoke, 2015). The focus of this research however is on substance use and suicidal ideation. These mental health challenges highlight the complex psychological landscape confronting adolescents and underscore the need for targeted interventions. The profound impact of these conditions stresses the importance of investigating strategies that can effectively address them, prompting this study to examine the efficacy of Cognitive Behavioral Therapy in improving the mental health of in-school adolescents.

One of the most disturbing mental health challenges confronting students today is suicidal ideation, which refers to recurring thoughts, fantasies, or planning of taking one’s own life (Smith & Jones, 2019). Often hidden, it reflects a deep emotional crisis in young people. Among students, suicidal ideation is commonly triggered by intense academic pressure, peer bullying, unresolved trauma, neglect, and dysfunctional family settings (Adebayo, Okeke & Nwankwo, 2023; Eze, 2018). In many public schools, affected students show signs of emotional detachment, hopelessness, and chronic sadness. Some isolate themselves from peers, while others express feelings of worthlessness or failure. What makes suicidal ideation particularly alarming is that it often goes unnoticed or minimized until it escalates into actual

suicide attempts (Akinade, 2019). The school environment, already demanding and stressful, can magnify these emotional burdens if proper psychological support is lacking. Without early intervention, these students risk dropping out, harming themselves, or losing interest in both academics and life itself (Oladele & Lawal, 2020).

Substance use disorder. This condition involves the harmful and often compulsive consumption of substances such as alcohol, cannabis, inhalants, and other psychoactive drugs. Among adolescents, substance abuse is frequently driven by peer pressure, emotional stress, environmental exposure, and the desire to escape unpleasant realities. In school settings, affected students may display behaviours such as truancy, defiance, aggression, and poor academic performance. The consequences often go beyond academics, including impaired judgment, risky behaviours, social isolation, and long-term cognitive damage. Left unchecked, substance abuse may lead to addiction, deteriorating mental health, and school dropout. Cognitive Behavioural Therapy (CBT) holds promise in addressing this problem by helping adolescents identify their triggers, understand the impact of their substance use, and develop healthier coping strategies that promote self-control and resistance to peer influence (Odejide, 2019; Atilola, 2021).

There are various evidence-based approaches for the treatment of mental health disorders, reflecting the multidimensional nature of psychological problems. Commonly adopted interventions include pharmacotherapy (use of psychotropic medications), psychodynamic therapy, humanistic/person-centred therapy, family and systemic therapy, behaviour therapy, and Cognitive Behavioural Therapy (CBT), among others. Pharmacotherapy is often effective in managing severe symptoms but does not always address the underlying maladaptive thought patterns that sustain psychological distress (Alao, 2015; Adebayo & Kolawole, 2018). Psychodynamic and humanistic approaches emphasise insight and self-actualisation, while family and systemic therapies address relational and environmental influences on mental health (Okoye, 2016). However, CBT has emerged as one of the most empirically supported interventions for adolescent mental health problems because it integrates cognitive restructuring, behavioural activation, and skills training to modify dysfunctional thoughts, emotions, and behaviours (Ogunyemi, 2017; Adewuya & Ola, 2019). Given its structured, time-limited, and culturally adaptable nature, CBT is particularly suitable for school-based counselling in Nigeria, where counsellors require practical and effective interventions that can be implemented within limited resources. Consequently, this study focuses on CBT to empirically examine its efficacy in alleviating selected mental health disorders among in-school adolescents.

Cognitive Behavioural Therapy (CBT) is a psychological treatment that helps individuals understand the relationships between their thoughts, feelings, and behaviours, and how these elements contribute to mental health disorders (Ghazali & Yusuf, 2022). The authors added that it involves identifying and challenging dysfunctional thinking patterns and replacing them with healthier, more adaptive thoughts, which in turn lead to improved emotional regulation and behavioural responses. CBT is highly relevant in the adjustment to mental health disorders as it equips individuals with practical skills to manage symptoms, reduce distress, and prevent relapse. Studies have shown that CBT is effective in treating various mental health disorders, including depression, anxiety, and Post-Traumatic Stress Disorder (Adekola & Olaleye, 2023). Its structured, goal-oriented approach fosters resilience and empowers individuals to take control of their mental well-being. Cognitive Behavioural Therapy has proved to be effective in treating suicidal ideation, depression, Attention Deficit Hyperactivity, examination phobia, substance use disorders and eating disorders among in-school adolescents. With all these challenges, the efficacy of Cognitive Behavioural Therapy on mental health disorders among in-school adolescents in Taraba State, Nigeria cannot be overstated. This

study therefore, seeks to examine the efficacy of Cognitive Behavioural Therapy on mental health disorders among in-school adolescents in Taraba State, Nigeria.

Statement of the Problem

The menaces of mental health disorders among in-school adolescents have become an increasing source of worry for parents, teachers, school counsellors and educational administrators in Nigeria, particularly in Taraba State, where many young people are exposed to academic pressure, poverty, insecurity, displacement, and unstable family environments. These psychosocial stressors have contributed to a growing incidence of depression, suicidal thoughts, examination phobia, substance-use behaviours and other emotional difficulties that seriously undermine students' academic engagement, self-esteem and overall wellbeing. In many secondary schools, these problems manifest in poor concentration, school avoidance, declining academic performance, behavioural problems and, in severe cases, self-harm and school dropout, yet structured psychological interventions are either absent or inadequately implemented.

If these mental health challenges are not effectively addressed, the consequences are far-reaching. Adolescents may carry unresolved psychological problems into adulthood, leading to chronic mental illness, unemployment, social maladjustment and increased risk of criminal behaviour. Schools also suffer from rising indiscipline, poor learning outcomes and strained teacher–student relationships, while communities bear the burden of increased healthcare costs and social instability. Despite the availability of professional counsellors in some schools, intervention practices are often limited to informal advice, moral instruction and crisis response, which rarely produce sustained therapeutic change.

Although previous studies have examined adolescent mental health problems and various counselling approaches in Nigeria, most have been descriptive, focusing on prevalence and correlates rather than rigorously testing the effectiveness of specific therapeutic interventions within school settings. Where interventions have been attempted, they are often poorly structured, not grounded in a clear theoretical framework, or not adapted for the Nigerian socio-cultural context. There is therefore a clear gap in empirical evidence on whether a structured, school-based Cognitive Behavioural Therapy programme can significantly improve the mental health outcomes of in-school adolescents in Taraba State. This study is designed to fill this gap by systematically investigating the efficacy of Cognitive Behavioural Therapy in reducing selected mental health disorders among in-school adolescents in Taraba State, Nigeria.

Purpose of the Study

The purpose of this study was to investigate the efficacy of Cognitive Behavioural Therapy on mental health disorders among in-school adolescents in Taraba State, Nigeria. Specifically, the study sought to:

1. Ascertain the mean difference in substance use disorder behaviours between in-school adolescents exposed to Cognitive Behavioural Therapy and those not exposed.
2. Determine the mean difference in suicidal ideation between in-school adolescents exposed to Cognitive Behavioural Therapy and those not exposed.

Research Questions

The study is guided by the following research questions:

1. What is the mean difference in substance use behaviours between in-school adolescents exposed to Cognitive Behavioural Therapy and those not exposed?

2. What is the mean difference in suicidal ideation between in-school adolescents exposed to Cognitive Behavioural Therapy and those not exposed?

Hypotheses

Two hypotheses were formulated and tested at 0.05 level of significance:

1. There is no significant difference between experimental subjects and control subjects on post-test measures of substance use disorders.
2. There is no significant difference between experimental subjects and control subjects on post-test measures of suicide ideation.

Research Design

The study employed a quasi-experimental design based on a non-randomized control group pretest-posttest design. The researcher used a pre-test and post-test approach, unlike pure experimental designs that are mostly post-test. Quasi-experimental design is a design in which the researcher assumed that the treatment and control groups were not initially equivalent and, as such, there was no random assignment of subjects to treatment and control groups (Dinardo, as cited in Anyim, 2019). The assumption was that the treatment and control groups were not initially equivalent, and therefore, there was no random assignment of subjects to treatment and control groups.

This design compared two groups on each variable. Both groups were measured twice, before and after the treatment. Only the experimental group was treated, while the control group was not. Because this design attempted to limit threats to internal validity, it was classified as quasi-experimental. With this design, if the subjects (in-school adolescents) were similar before treatment but different after treatment, the researcher could be confident that the treatment had an effect. However, if both groups showed the same degree of change between the pre-test and post-test, it was concluded that factors other than the treatment were responsible for the change. Thus, this design reduced the threat of assignment bias and limited threats to validity. The design was represented thus:

Group	Pre-test	Treatment	Post-test
A	O_1	x	O_2
B	O_1	-	O_2

Where:

A	=	Experimental group
B	=	Control group
O_1	=	Pre-test
O_2	=	Post-test
x	=	Treatment (Cognitive Behavioural Therapy)
-	=	No Treatment

With the use of non-equivalent group strategy, the researcher will administer a pre-test to both the experimental and control groups before exposing the experimental group to CBT. After the experiment, the researcher again will administer a post-test to experimental and control groups to determine the efficacy of Cognitive Behavioural Therapy on mental health disorders among in school adolescents in Taraba State Nigeria.

The population of this study comprised in-school adolescents in public secondary schools in Taraba State who exhibited symptoms of mental health disorders. Taraba State has sixteen (16) Local Government Areas and a total of three hundred and eighty (380) public secondary schools with an estimated enrolment of two hundred thousand, three hundred and eighty-two (200,382) in-school adolescents (Department of Planning, Research and Statistics, Ministry of Education, Jalingo, Taraba State 2025). From this larger population, only adolescents who showed observable indicators of mental health disorders were considered eligible for inclusion in the study. These adolescents were identified through a multi-stage screening process that involved referrals by school counsellors and teachers, preliminary

behavioural observations, and the administration of standardized psychological screening instruments relevant to the study variables of suicidal ideation, and substance use disorders. The sample was two hundred and forty eight (248) in-school adolescents.

The instrument used for data collection was a self-structured questionnaire known as the “Mental Health Disorder Questionnaire (MHDQ).” It was divided into two sections, A and B. Section A consisted of a biodata that sought basic information about the respondents, while Section B contained questions grouped in clusters, where respondents were expected to respond by ticking Strongly Agreed (SA), Agreed (A), Disagreed (D), or Strongly Disagreed (SD). This 10-item structured questionnaire was created to evaluate the efficacy of Cognitive Behavioural Therapy on mental health disorders among in-school adolescents. It was designed to measure students’ coping and adaptive responses across two critical areas of mental health disorders: substance use and suicidal ideation.

The questionnaire is divided into two clusters, each dedicated to one mental health disorder. Cluster A investigated substance use disorders, assessing the extent of substance use, resistance to peer influence, cravings, and the behavioral impact of addictive substances. Cluster B focused on suicidal ideation, assessing the frequency and intensity of suicidal thoughts, psychological distress, and mental vulnerability. Each item in the questionnaire is rated on a four-point scale, with 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, and 4 = Strongly Agree. This scale captures varying levels of agreement or disagreement with each statement, allowing for understanding of students’ response to a particular disorder. Responses collected from this instrument offered a comprehensive view of students’ coping abilities, resilience, and specific areas where additional support or intervention may be beneficial. This tool aims to aid educators and counsellors in supporting adolescents effectively, enhancing their overall mental health and academic experience. In addition to the instrument, a treatment plan was developed in line with the study variables to guide the research assistants in conducting the therapy. The treatment plan outlined structured Cognitive Behavioural Therapy (CBT) sessions tailored to address each of the two identified mental health disorders.

The data collected from the study were analyzed using descriptive statistics, specifically mean and standard deviation, to answer the research questions. For testing the hypotheses, Analysis of Covariance (ANCOVA) was employed at a 0.05 level of significance. ANCOVA was chosen because it allows for comparison of the post-test scores between the experimental and control groups while statistically controlling for any initial differences in pre-test scores. At the 0.05 level of significance, the decision rule is to reject the null hypothesis if the p-value ≤ 0.05 , otherwise retain it.

Results

Test-related anxiety and enhancing students’ confidence in academic evaluations.

Research Question 1: What is the mean difference in substance use behaviours between in-school adolescents exposed to Cognitive Behavioural Therapy and those not exposed?

The data which provide answer to this research question is presented in Table 1

Table 1: Mean Difference Substance Use Disorders Between In-School Adolescents Exposed to Cognitive Behavioural Therapy and Those that Are Not

Group	N	Pre-test		Post-test		Mean gain
		\bar{x}	SD	\bar{x}	SD	
Cognitive Behavioural Therapy	117	2.04	0.747	2.95	0.899	0.91
Control Group	131	2.04	0.706	2.03	0.744	0.01
Mean Difference						0.90

Table 1 shows the mean difference in substance use disorders between in-school adolescents exposed to Cognitive Behavioural Therapy (CBT) and those in the control group. The results reveal that the mean pre-test score for the experimental group was 2.04 (SD = 0.747), which increased to 2.95 (SD = 0.899) at post-test, giving a mean gain of 0.91. Conversely, the control group recorded a mean pre-test score of 2.04 (SD = 0.706) and a post-test score of 2.03 (SD = 0.744), resulting in a negligible mean gain of 0.01. The overall mean difference between the two groups was 0.90, in favour of the experimental group. This finding implies that Cognitive Behavioural Therapy had a positive effect in reducing substance use disorders among in-school adolescents compared to those who did not receive the intervention.

Research Question 2: What is the mean difference in suicidal ideation between in-school adolescents exposed to Cognitive Behavioural Therapy and those not exposed?

The data which provide answer to this research question is presented in Table 2.

Table 2: Mean Difference in Suicidal Ideation Between In-School Adolescents Exposed to Cognitive Behavioural Therapy and Those that are Not

Group	N	Pre-test		Post-test		Mean gain
		\bar{x}	SD	\bar{x}	SD	
Cognitive Behavioural Therapy	117	1.87	0.815	2.99	0.866	1.12
Control Group	131	1.90	0.753	2.05	0.737	0.15
Mean Difference						0.97

Table 2 indicates a clear difference in the suicidal ideation scores between adolescents exposed to CBT and those in the control group. At pre-test, both groups recorded comparable mean scores (CBT group = 1.87, SD = 0.815; Control group = 1.90, SD = 0.753), suggesting initial similarity in suicidal ideation levels. However, at post-test, the CBT group recorded a mean score of 2.99 (SD = 0.866), while the control group had a mean score of 2.05 (SD = 0.737). This translates to a mean gain of 1.12 for the CBT group compared with 0.15 for the control group. The resulting mean difference of 0.97 demonstrates that adolescents who underwent Cognitive Behavioural Therapy showed greater improvement in the reduction of suicidal ideation compared with their counterparts in the control group.

Testing of Hypotheses

Hypotheses 1: There is no significant mean difference between experimental subjects and control subjects on post-test measures of substance use disorders.

Table 3: ANCOVA on Mean Difference Between Experimental Subjects and Control Subjects on Post-Test Measures of Substance Use Disorders

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.
Corrected Model	78.154 ^a	2	39.077	68.620	.000
Intercept	68.562	1	68.562	120.396	.000
Pres substanceusedisorder	26.051	1	26.051	45.746	.000
Group	51.871	1	51.871	91.086	.000
Error	139.520	245	.569		
Total	1723.000	248			
Corrected Total	217.673	247			

a. R Squared = .359 (Adjusted R Squared = .354)

Table 3 reveals that $F(1, 245) = 91.086$; $p = 0.000 < 0.05$. Since the p value (0.000) is less than the alpha level (0.05), the null hypothesis is not accepted. This suggests that CBT has a

significant effect on reducing substance use disorders among in-school adolescents. Therefore, there is a significant mean difference in the post-test measures of substance use disorders between the experimental and control groups.

Hypotheses 2: There is no significant mean difference between experimental subjects and control subjects on post-test measures of suicidal ideation.

Table 4: ANCOVA on Mean Difference Between Experimental Subjects and Control Subjects on Post-Test Measures of Suicide Ideation

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	63.246 ^a	2	31.623	52.085	.000
Intercept	154.270	1	154.270	254.092	.000
Presuicidal	8.868	1	8.868	14.605	.000
Group	55.177	1	55.177	90.880	.000
Error	148.750	245	.607		
Total	1757.000	248			
Corrected Total	211.996	247			

a. R Squared = .298 (Adjusted R Squared = .293)

Table 4 reveals that $F(1, 245) = 90.880$; $p = 0.000 < 0.05$. Since the p value (0.000) is less than the alpha level (0.05), the null hypothesis is not accepted. This indicates that Cognitive Behavioural Therapy (CBT) has a significant effect on reducing suicidal ideation among in-school adolescents. Thus, there is a significant mean difference in the post-test measures of suicidal ideation between the experimental and control groups.

Discussion of Findings

Based on the analyzed data the following findings are thus discussed.

Hypotheses one revealed that there is a significant mean difference between experimental subjects and control subjects on post-test measures of substance use disorders. This finding means that CBT is effective in reducing substance use tendencies among in-school adolescents by promoting self-monitoring, coping skills, and cognitive restructuring. This finding corroborates the work of Usman and Aminu (2021) whose pre-test result revealed that secondary school students were having positive attitudes towards substance abuse before the intervention. After the intervention, it was discovered that Cognitive Behavioural Therapy reducing their craving and use of substance. Also, Isaiah and Otobo (2020) found that there was significant main effect of treatment in reduction of substance abuse among adolescents with hearing impairment. Furthermore, Adekunle and Musa (2019) findings showed that adolescents who participated in CBT sessions exhibited significant reductions in substance use behaviors and an increase in self-regulation and coping skills compared to those in the control group. The therapy also improved participants' academic performance and social interactions. Additionally, no significant differences were observed in the effectiveness of CBT based on gender. This finding is justified as CBT empowers adolescents to restructure their cognitive framework, recognize the consequences of substance use, and adopt healthier behavioural responses to stress, peer pressure, and emotional distress rather than taking to drug use and abuse as an escape route.

Hypotheses two revealed that there is a significant mean difference between experimental subjects and control subjects on post-test measures of suicidal ideation. This finding means that exposure to Cognitive Behavioural Therapy (CBT) significantly reduces suicidal ideation among in-school adolescents by helping them to restructure negative thought patterns, adopt healthier coping mechanisms, and develop more adaptive responses to stress and emotional distress. This finding agrees with that of Nwosu and Nwankwo (2020) whose

study revealed among others that Cognitive Behavioural Therapy is effective in reducing suicide tendency among secondary school students than conventional counselling and the effect is significant. Similarly, Adeyemo and Okeke (2019) findings revealed that CBT was significantly effective in reducing suicidal ideation among participants in the experimental group compared to those in the control group. The therapy also improved coping mechanisms and emotional resilience among the participants. This finding is further justified by the fact that CBT addresses the underlying cognitive distortions associated with suicidal ideation, thereby promoting adaptive thinking, emotional stability, and reduced self-destructive thoughts. Furthermore, the structured nature of CBT provides adolescents with a framework for managing crises, enhancing problem-solving skills, and developing resilience against suicidal thoughts and tendencies.

Conclusion

The findings of the study demonstrate that Cognitive Behavioural Therapy (CBT) was highly effective in improving the mental health outcomes of in-school adolescents exposed to the intervention. Participants in the experimental group showed significantly better post-test outcomes than those in the control group across all the mental health disorders examined, that is, substance use disorder and suicidal ideation. These consistent significant mean differences indicate that CBT successfully reduced maladaptive thoughts, emotional distress, and dysfunctional behaviours among the adolescents who received the treatment. Overall, the results confirm that Cognitive Behavioural Therapy is an effective psychological intervention for managing multiple mental health disorders among in-school adolescents and highlight its potential as a viable school-based therapeutic approach for promoting adolescents' psychological well-being.

Recommendations

Based on the findings of this study, the following recommendations are made to effectively address mental health disorders among in-school adolescents in Taraba State, Nigeria:

1. Substance abuse counsellors should implement school-based CBT programs that address substance use disorders (focusing on cognitive restructuring to identify triggers and develop healthier coping mechanisms) to reduce substance disorders among in-school adolescents.
2. Counsellors and school administrators should implement structured CBT intervention programmes aimed at reducing suicidal ideation among students by integrating cognitive restructuring sessions into the school counselling framework.

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