Childhood Adversity and Positive Peer Support as Predictors of Psychological Well-being among Adolescents in Ibadan Metropolis, Nigeria

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ABSTRACT

The effects of childhood adversity have been identified as a major developmental risk factor with long-term consequences for the psychological functioning of adolescents. Positive peer support has also been recognised as an important social resource that promotes positive mental health. However, there is limited empirical evidence examining the combined effects of childhood adversity and positive peer support on adolescents' psychological well-being, particularly within the Nigerian context. This study investigated the predictive influence of childhood adversity and positive peer support on the psychological well-being of adolescents in Ibadan Metropolis, Nigeria, and examined whether positive peer support moderates the relationship between childhood adversity and psychological well-being.

The study adopted a descriptive cross-sectional research design. A total of 200 senior secondary school adolescents were selected using a multistage sampling technique. Data were collected using the Childhood Trauma Questionnaire–Short Form, the Warwick-Edinburgh Mental Well-being Scale, and the Positive Peer Support Scale. Descriptive statistics were employed for data analysis, while Hayes' PROCESS Macro Version 5 (Model 1) with HC3 heteroscedasticity-consistent standard errors was used to test the study hypotheses at the 0.05 level of significance.

The findings revealed that childhood adversity negatively and significantly predicted psychological well-being ($B = -0.323$, $p = .012$), whereas positive peer support positively and significantly predicted psychological well-being ($B = 0.633$, $p < .001$). The interaction between childhood adversity and positive peer support was not statistically significant ($B = -0.035$, $p = .071$), indicating that positive peer support did not moderate the relationship between childhood adversity and psychological well-being. These findings suggest that although positive peer support contributes to improved psychological well-being among adolescents, it does not significantly buffer the adverse effects of childhood adversity. The study therefore recommends strengthening school-based interventions that address childhood adversity while promoting supportive peer relationships to enhance adolescents' mental health outcomes.

Keywords: childhood adversity, positive peer support, psychological well-being, adolescents, moderation, Nigeria.

INTRODUCTION

Childhood adversity refers to a broad range of potentially traumatic experiences that occur before the age of 18 years. These experiences may include physical, emotional, and sexual abuse, neglect, and household dysfunction arising from parental mental illness, substance abuse, domestic violence, and other forms of family or community instability. Due to their profound influence on health and development across the lifespan, such experiences have received considerable research attention. The Adverse Childhood Experiences (ACE) Study demonstrated that adverse experiences accumulate over time, producing cumulative effects that increase the likelihood of physical, psychological, and behavioural problems later in life. Individuals who experienced four or more categories of adversity were significantly more likely to

develop depression, engage in suicidal behaviour, experience substance abuse, and suffer from major causes of adult morbidity than those who had not experienced such adversities (Felitti et al., 1998).

Although the long-term effects of childhood adversity are well documented, increasing evidence indicates that these experiences also have significant implications during adolescence. Childhood adverse experiences have been associated with difficulties in emotional regulation, self-concept, interpersonal relationships, and academic performance. A systematic review involving adolescents aged 12–17 years found that childhood adversity was consistently associated with increased internalising symptoms, externalising behaviours, and poorer educational outcomes (Lam et al., 2024). Beyond these negative outcomes, recent research has highlighted the detrimental impact of childhood adversity on positive mental health indicators. Adolescents who report multiple adverse experiences are more likely to experience lower life satisfaction, reduced subjective well-being, and poorer psychological well-being compared to those who report fewer or no adverse experiences (Leiva et al., 2022).

Childhood adversity is particularly concerning in low- and middle-income countries, where socioeconomic challenges may increase children's exposure to adverse experiences. In Nigeria, high rates of child maltreatment and household adversity have been reported among adolescents and young adults. For instance, a study conducted among secondary school students in Calabar found that more than two-thirds had experienced at least one form of childhood abuse, with sexual abuse, physical neglect, and physical abuse being the most frequently reported. Each form of adversity was independently associated with depressive symptoms and suicidal behaviours, while exposure to multiple adverse experiences significantly increased psychological risk (Edet et al., 2022). Similar findings have been reported among university students in Osun State and South-Eastern Nigeria, where moderate-to-severe childhood adversity was associated with poor psychosocial well-being and elevated psychological distress (Agbaje et al., 2021; Ibigbami et al., 2024). Furthermore, emerging evidence from Ibadan indicates that childhood adversity is linked to difficulties in emotional regulation and reduced self-esteem among adolescents (Ogunbowale et al., 2025). These findings underscore childhood adversity as a critical developmental concern requiring increased attention within the Nigerian context.

Psychological well-being is a central indicator of positive mental health and healthy adolescent development. While traditional perspectives on mental health often focus on the absence of psychological disorders, psychological well-being emphasises optimal functioning and the realisation of individual potential. Ryff's multidimensional model conceptualises psychological well-being through six dimensions: self-acceptance, positive relationships with others, autonomy, environmental mastery, purpose in life, and personal growth. Together, these dimensions reflect an individual's ability to maintain meaningful relationships, pursue worthwhile goals, manage environmental demands, and achieve continuous personal development (Gao & McLellan, 2018; Stavraki et al., 2022). Psychological well-being is particularly important during adolescence because it influences emotional adjustment, academic engagement, social competence, and successful transition into adulthood. Research indicates that higher levels of psychological well-being are associated with better physical health, reduced psychological distress, and more favourable long-term health outcomes among adolescents (Qureshi et al., 2024). Likewise, a recent meta-analysis found that school connectedness, an important component of adolescents' social environment, is positively associated with psychological well-being across diverse cultural contexts (Li et al., 2023).

Research on adolescent psychological well-being in Nigeria is gradually expanding; however, empirical evidence remains relatively limited. Existing studies indicate that both personal and environmental factors influence psychological well-being, including family structure, socio-demographic characteristics, emotional intelligence, and peer relationships. For example, Adewumi et al. (2022) reported that slightly more than half of secondary school students in South-West Nigeria demonstrated high levels of psychological well-being, particularly in the dimensions of autonomy and personal growth. Other studies conducted in and around Ibadan have similarly identified peer influence, family characteristics, and emotional competencies as significant determinants of adolescents' psychological well-being.

Positive peer support represents one of the most influential social resources available to adolescents. It encompasses the emotional, informational, and practical support adolescents receive from their peers,

including acceptance, encouragement, and companionship. As adolescents become increasingly independent from their families, peer relationships assume a more prominent role in identity formation, emotional adjustment, and social development. Supportive friendships provide opportunities for emotional expression, problem-solving, and the development of effective coping strategies, all of which contribute to positive psychological well-being (Roach, 2018). An integrative review further revealed that adolescents with supportive peer relationships report higher self-esteem, fewer internalising symptoms, and a greater likelihood of seeking help when confronted with psychological challenges (Roach, 2018).

Research suggests that the quality of peer relationships is more important than the size of peer networks. Friendship characteristics such as warmth, trust, and reciprocity have been found to predict lower levels of depressive symptoms during adolescence and adulthood, whereas the number of friends does not significantly predict depressive symptoms when friendship quality is considered (Letkiewicz et al., 2023). Similarly, a meta-analysis conducted by Mitic et al. (2021) demonstrated that positive peer relationships contribute positively to identity development, positive affect, social-emotional competence, and overall psychological adjustment. The study further noted that the benefits of supportive peer relationships are strengthened when accompanied by supportive school and community environments.

Evidence from Nigeria further highlights the importance of peer support in promoting adolescents' psychological well-being. Ajao et al. (2024) found that peer social support remained a significant predictor of psychological well-being among adolescents in Ilorin Metropolis, even after controlling for self-esteem. Likewise, Edet et al. (2024) reported that higher levels of social support were associated with lower depressive symptoms and higher self-esteem among adolescents in Calabar, irrespective of family socioeconomic status. Collectively, these findings suggest that positive peer relationships constitute a meaningful protective factor that supports healthy psychological functioning among young people, particularly within socially and economically challenging environments.

Statement of the Problem

Psychological well-being is a crucial determinant of positive outcomes in health, emotional stability, social functioning, academic achievement, and coping during adolescence. Adolescence is also a developmental period characterised by increased exposure to experiences and circumstances that can either promote or undermine mental health. Childhood adversity has been widely recognised as a significant factor influencing adolescents' psychological well-being, as adverse childhood experiences may have enduring effects on emotional, cognitive, and behavioural development. However, previous research has predominantly focused on negative mental health outcomes such as depression, anxiety, and behavioural problems, while comparatively fewer studies have examined psychological well-being as a positive dimension of adolescent mental health.

Positive peer support has been identified as an important developmental resource that enhances adolescents' psychological well-being by providing emotional, social, and practical support. Nevertheless, existing evidence remains inconclusive regarding its role in the relationship between childhood adversity and psychological well-being. Although adverse childhood experiences are associated with numerous negative developmental outcomes, some studies suggest that positive peer relationships may buffer the effects of such experiences, whereas others have reported mixed or weaker findings. These inconsistencies highlight the need for further investigation in diverse social and environmental contexts where adolescents may encounter varying challenges and support systems.

In Nigeria, adverse childhood experiences are common among adolescents due to factors such as poverty, family instability, neglect, abuse, and other socio-economic challenges. Although there is a growing body of literature examining the impact of childhood adversity on psychological development, research investigating the combined effects of childhood adversity and positive peer support on adolescents' psychological well-being remains limited. Furthermore, despite the unique socio-economic characteristics of Ibadan Metropolis, relatively few studies have focused specifically on adolescents within this setting.

Addressing this gap presents an important opportunity to generate evidence that can inform interventions aimed at promoting positive mental health among adolescents. Consequently, the present study examines the influence of childhood adversity and positive peer support on the psychological well-being of adolescents in Ibadan Metropolis, Nigeria. The study also investigates the moderating role of positive peer support in the relationship between childhood adversity and psychological well-being. Findings from this study may provide valuable empirical evidence to support the development of educational, counselling, and mental health interventions targeted at improving adolescent well-being.

Purpose of the Study

The primary purpose of this study is to examine the influence of childhood adversity and positive peer support on the psychological well-being of adolescents in Ibadan Metropolis, Nigeria. Specifically, the study seeks to:

- Examine the relationship between childhood adversity and psychological well-being among adolescents in Ibadan Metropolis, Nigeria.
- Determine the relationship between positive peer support and psychological well-being among adolescents in Ibadan Metropolis, Nigeria.
- Investigate the moderating effect of positive peer support on the relationship between childhood adversity and psychological well-being among adolescents in Ibadan Metropolis, Nigeria.

Research Questions

The study is guided by the following research questions:

- What is the relationship between childhood adversity and psychological well-being among adolescents in Ibadan Metropolis, Nigeria?
- What is the relationship between positive peer support and psychological well-being among adolescents in Ibadan Metropolis, Nigeria?
- Does positive peer support moderate the relationship between childhood adversity and psychological well-being among adolescents in Ibadan Metropolis, Nigeria?

Significance of the Study

This study is significant because it contributes to the growing body of knowledge on factors associated with adolescents' psychological well-being within the Nigerian context. By examining childhood adversity and positive peer support as predictors of psychological well-being, the study extends existing literature, which has predominantly focused on psychological distress and other negative mental health outcomes. The findings will provide empirical evidence regarding the relationship between adverse childhood experiences and positive psychological outcomes, thereby enhancing understanding of positive psychological functioning during adolescence.

The findings of this study will be valuable to teachers and school administrators by highlighting the importance of creating and maintaining psychologically supportive school environments. An improved understanding of the effects of childhood adversity and the role of positive peer support can inform the design and implementation of school-based programmes that promote positive peer interactions, strengthen students' social and emotional competencies, and enhance their overall psychological well-being.

The study will also be beneficial to school counsellors, psychologists, and other mental health professionals by providing evidence that can assist in identifying adolescents who may be vulnerable to poor psychological outcomes due to adverse childhood experiences. The findings may inform the development and implementation of counselling, psychosocial support, and preventive intervention programmes aimed at strengthening resilience and promoting emotional well-being among adolescents.

Furthermore, parents and caregivers may benefit from the study by gaining a deeper understanding of the long-term effects of adverse childhood experiences on adolescents' mental health. Such knowledge may encourage the creation of supportive home environments that foster healthy emotional development and promote positive peer relationships among adolescents.

The findings will also be useful to policymakers and educational authorities responsible for adolescent welfare and mental health programmes. Evidence generated from this study may inform the formulation of policies and interventions aimed at strengthening school mental health services and creating environments that support positive youth development.

Finally, this study will serve as a valuable reference for researchers in the fields of educational psychology, developmental psychology, and adolescent mental health. It provides empirical data that may stimulate further research on childhood experiences, peer relationships, and adolescent psychological well-being across diverse cultural and socio-economic contexts, thereby contributing to the advancement of knowledge in the field.

LITERATURE REVIEW

Childhood Adversity

Childhood adversity refers to a broad range of potentially traumatic experiences that occur before the age of 18 years and have the potential to disrupt healthy physical, emotional, cognitive, and social development. These adverse experiences include physical, emotional, and sexual abuse; neglect; dysfunctional family environments; domestic violence; parental substance abuse; mental illness within the family; and community-related stressors. Due to its long-term effects on health and psychosocial functioning throughout the lifespan, childhood adversity has received considerable attention within developmental and mental health research. The Adverse Childhood Experiences (ACE) Study established a clear dose-response relationship between childhood adversity and adverse health outcomes. Individuals who experienced four or more adverse childhood experiences were found to be four to twelve times more likely to experience depression, attempt suicide, and engage in illicit drug and alcohol use, and two to four times more likely to smoke and engage in risky sexual behaviours compared to individuals who reported no adverse childhood experiences (Felitti et al., 1998).

These findings have been supported by subsequent studies demonstrating that the effects of childhood adversity are not confined to adulthood but become evident during adolescence. Sahle et al. (2021), in a systematic review and meta-analysis, reported that cumulative exposure to adverse childhood experiences doubled the risk of anxiety disorders, depression, and suicidal behaviours among adolescents, regardless of gender or age at exposure. Similarly, Lam et al. (2024), in a scoping review of studies involving adolescents aged 12–17 years, found consistent associations between cumulative adversity and increased internalising symptoms, externalising behaviours, and poorer educational outcomes. Furthermore, Hashim et al. (2024) reported pooled correlation coefficients ranging from 0.24 to 0.41 for emotional maltreatment across several studies, identifying emotional maltreatment as a particularly significant contributor to adolescent psychopathology. Collectively, these findings suggest that childhood adversity represents a major developmental risk factor capable of affecting multiple domains of adolescent functioning.

Adolescents in sub-Saharan Africa are particularly vulnerable to adverse childhood experiences due to socioeconomic disadvantage, family instability, and limited access to protective social services. Findings from the Violence Against Children and Youth Surveys conducted across multiple countries in the region indicate that many children are exposed to multiple forms of adversity. Evidence from Nigeria also reveals alarmingly high prevalence rates. Akintola (2025) reported that 92.5% of in-school adolescents in Lagos State had experienced adverse childhood events, with 50.6% reporting mild-to-moderate exposure, 38.8% reporting moderate exposure, and 3.1% reporting severe exposure. Emotional abuse (86.9%), physical neglect (90.5%), emotional neglect (90.5%), physical abuse (42.8%), and sexual abuse (32.6%) were identified as the most prevalent forms of adversity. Similarly, Salawu and Owoaje (2020) found that 92% of youths in rural Oyo State had experienced at least one adverse childhood experience, with psychological

neglect, physical neglect, and psychological abuse being the most common forms. The study further identified low maternal education and low family income as significant correlates of childhood adversity. Within urban centres such as Ibadan, childhood adversity has also been associated with emotional dysregulation, reduced self-esteem, and increased internalising symptoms among adolescents (Ogunbowale et al., 2025; Ibigbami et al., 2024).

Overall, the literature identifies childhood adversity as a prevalent developmental risk factor with far-reaching consequences for adolescent adjustment and well-being. While much of the existing research has focused on psychopathology and behavioural disorders, emerging evidence suggests that childhood adversity may also undermine positive developmental outcomes, highlighting the importance of examining its relationship with adolescents' psychological well-being.

Positive Peer Support

Positive peer support refers to the emotional, informational, and instrumental assistance that adolescents receive from friends and age-mates who provide acceptance, encouragement, companionship, and guidance. As adolescents gradually become less dependent on their families, peer relationships assume increasing importance in their social and emotional development. During this developmental stage, peers provide opportunities for identity exploration, emotional expression, problem-solving, and the development of adaptive coping strategies. Consequently, peer support serves as an important resource for healthy psychological functioning (Roach, 2018). The significance of positive peer support is well established in developmental psychology. An integrative review of studies published between 2007 and 2017 found that supportive peer relationships were consistently associated with higher self-esteem, lower levels of internalising symptoms among adolescents experiencing psychological difficulties, and an increased willingness to seek both professional and informal support when needed (Roach, 2018). These findings reinforce the critical role of peer support in fostering resilience and promoting healthy psychological development among adolescents.

Research further suggests that the quality of peer relationships is more important than the quantity of friendships. Using data from the National Longitudinal Study of Adolescent to Adult Health involving 3,857 participants, Letkiewicz et al. (2023) found that warmth, trust, and reciprocity within adolescent friendships significantly predicted lower levels of depressive symptoms during adolescence and adulthood. In contrast, the number of friendships alone did not significantly predict psychological outcomes after controlling for relationship quality. Similarly, Mitic et al. (2021), in a systematic review and exploratory meta-analysis of 364 studies, reported that supportive peer relationships positively influenced identity development, social-emotional competence, and positive affect. The study further highlighted the important role of school and community environments in fostering supportive peer relationships.

Evidence from Nigeria also underscores the importance of positive peer support for adolescent mental health. Ajao et al. (2024) reported that peer social support significantly predicted psychological well-being among adolescents in Ilorin Metropolis even after controlling for self-esteem. Likewise, Edet et al. (2024) found that higher levels of social support were associated with lower depressive symptoms and higher self-esteem among adolescents in Calabar, irrespective of family socioeconomic status. These findings align with broader African evidence indicating that peer connectedness can mitigate the negative psychological effects of experiences such as bullying, economic hardship, and social exclusion. Adolescents who have experienced childhood adversity may particularly benefit from positive peer support. Supportive friendships characterised by warmth, trust, and acceptance have been associated with reduced emotional distress, stronger feelings of belonging, and enhanced competence among adolescents exposed to adverse experiences. Conversely, the absence of supportive peer relationships or exposure to negative peer interactions may increase vulnerability to the long-term consequences of childhood adversity. Positive peer support is therefore regarded as an important protective factor that promotes healthy psychological development, particularly in resource-constrained settings where formal mental health services may be limited.

Psychological Well-being

Psychological well-being is widely recognised as a multidimensional construct that reflects optimal functioning and the realisation of one's potential, rather than merely the absence of psychological disorders. Unlike the traditional medical model of mental health, which primarily focuses on symptoms of mental illness, psychological well-being emphasises positive functioning, personal fulfilment, and successful adaptation to life's challenges. According to Ryff's eudaimonic model, psychological well-being comprises six interrelated dimensions: self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth. Together, these dimensions reflect an individual's ability to maintain a positive self-image, establish meaningful interpersonal relationships, make independent decisions, effectively manage environmental demands, and pursue meaningful life goals while continuing to develop personally throughout life (Gao & McLellan, 2018; Stavraki et al., 2022).

Adolescence represents a particularly important period for psychological well-being due to the significant biological, cognitive, and social changes that occur during this stage of development. Psychological well-being serves as a valuable resource that supports adaptive functioning as adolescents navigate identity formation, increasing academic demands, and expanding social relationships. Longitudinal studies have demonstrated that adolescents with higher levels of psychological well-being experience better mental health outcomes in the present and improved physical and cardiometabolic health outcomes in adulthood. For example, Qureshi et al. (2024) reported that adolescents with a stronger sense of belonging were 23% more likely to maintain a healthy cardiometabolic profile throughout young adulthood. Similarly, Li et al. (2023), in a meta-analysis, found a strong positive relationship between school connectedness and psychological well-being, emphasising the contribution of supportive educational environments to positive adolescent development.

The multidimensional nature of psychological well-being has received considerable empirical support across diverse cultural settings. Studies have consistently confirmed the six-factor structure of Ryff's Psychological Well-being Scales across various cultural contexts, although the relative importance of individual dimensions may differ. Furthermore, shortened and age-appropriate versions of the scale have demonstrated strong reliability and validity, making them particularly suitable for use with adolescent populations while minimising respondent burden (Stavraki et al., 2022; Gao & McLellan, 2018). Although research on adolescent psychological well-being in Nigeria remains relatively limited, the available evidence continues to expand. Adewumi et al. (2022) reported that 56.25% of secondary school students in South-West Nigeria exhibited high levels of psychological well-being, with autonomy and personal growth emerging as the most prominent dimensions. The study also identified family type, ethnicity, and academic progression as significant correlates of psychological well-being. Other studies conducted in Ibadan and surrounding areas have similarly linked adolescents' psychological well-being to emotional intelligence, supportive family environments, and positive peer influence, highlighting the importance of both personal characteristics and environmental resources in fostering positive psychological functioning.

Overall, psychological well-being represents a critical developmental outcome that extends beyond the absence of mental illness to encompass optimal functioning, resilience, and positive adjustment. Understanding the psychosocial factors that influence adolescents' psychological well-being is essential for developing interventions that promote healthy development and enhance overall mental health outcomes.

Empirical Review

Childhood Adversity and Psychological Well-being

Extensive empirical evidence demonstrates a strong association between childhood adversity and poor psychological outcomes during adolescence. Across diverse cultural contexts, children and adolescents who experience adverse childhood events are more likely to report lower levels of life satisfaction, emotional functioning, and overall well-being than those who have not experienced such adversities.

One of the few studies that specifically examined childhood adversity in relation to psychological well-being

was conducted by Leiva et al. (2022) among 2,699 adolescents aged 11 to 17 years in Chile. The study found that adolescents who experienced multiple adverse childhood events reported significantly lower scores across all dimensions of subjective well-being compared to their counterparts with no adverse childhood experiences. Furthermore, the findings indicated a cumulative effect, whereby increasing exposure to adversity was associated with progressively lower levels of well-being. These results support the cumulative risk perspective, which suggests that the negative effects of childhood adversity intensify with each additional adverse experience.

Similarly, Balistreri and Alvira-Hammond (2016), using nationally representative data from the United States National Survey of Children's Health (NSCH), examined adolescents aged 12 to 17 years and identified a clear dose-response relationship between adverse childhood experiences and psychological well-being. Their findings revealed that each additional adverse childhood experience reduced the likelihood of adolescents reporting high levels of well-being. The study also found that neighbourhood safety, school safety, and parental monitoring partially mediated this relationship. Adolescents who reported multiple adverse childhood experiences were significantly more likely to experience poor social-emotional functioning than those who reported none. Collectively, these studies underscore childhood adversity as a significant risk factor for reduced psychological well-being and highlight the importance of protective environmental factors.

Positive Peer Support and Psychological Well-being

The relationship between positive peer support and adolescents' psychological well-being has received considerable empirical attention. Previous studies have consistently demonstrated that supportive peer relationships contribute positively to adolescents' emotional adjustment, social competence, and psychological functioning. In a four-wave longitudinal study, Affuso et al. (2024) found a reciprocal relationship between peer support and psychological well-being over time. Adolescents who reported higher levels of peer support also reported higher levels of psychological well-being, while higher psychological well-being, in turn, facilitated the development and maintenance of supportive peer relationships. These findings suggest the existence of a positive developmental cycle linking peer support and psychological well-being throughout adolescence.

Similar findings have been reported in non-Western contexts. Kholiq et al. (2026), in a study involving 1,364 Indonesian adolescents aged 11 to 18 years, found a strong positive correlation between peer support and psychological well-being ($r = .547$, $p < .001$). The study further revealed that peer support exerted a greater influence on psychological well-being than help-seeking behaviour, emphasising the importance of supportive friendships in promoting adolescent mental health. Likewise, Roach (2018), through a review of 15 studies, concluded that supportive peer relationships positively influenced adolescents' self-esteem, reduced internalising difficulties, and encouraged adaptive help-seeking behaviours. Furthermore, Letkiewicz et al. (2023) found that relationship quality, characterised by warmth, trust, and reciprocity, was more strongly associated with psychological well-being and lower depressive symptoms than the mere number of friendships. Collectively, these findings suggest that the quality of peer relationships is more important than their quantity in determining psychological benefits for adolescents.

Studies Examining Childhood Adversity and Positive Peer Support

Although substantial evidence exists regarding childhood adversity and positive peer support independently, relatively few studies have simultaneously examined their combined influence on adolescents' psychological outcomes. Existing studies exploring whether supportive peer relationships can mitigate the negative effects of childhood adversity have produced mixed findings. A longitudinal study conducted in Australia involving 4,074 adolescents found that adverse childhood experiences significantly predicted increases in internalising and externalising symptoms over 24 months. However, positive peer interactions did not significantly moderate the relationship between childhood adversity and these psychological outcomes. Instead, negative peer interactions intensified the adverse effects of childhood adversity. These findings suggest that while supportive friendships contribute positively to adolescent adjustment, they may not be sufficient to fully offset the developmental consequences of severe early-life adversity.

Conversely, Scheuplein and van Harmelen (2022), in a preregistered systematic review, found evidence that high-quality friendships can reduce psychological and neurobiological stress responses among adolescents exposed to childhood adversity. Although the authors acknowledged the limited evidence available in neurobiological research, they concluded that supportive peer relationships represent an important protective factor that can foster resilience following adverse childhood experiences. Similarly, a study conducted among adolescents in Chinese boarding schools found that peer support had a direct negative effect on depressive symptoms and moderated the relationship between negative life events and psychological adjustment, particularly when combined with active coping strategies. These findings highlight inconsistencies within the literature and underscore the need for further investigation across different cultural, social, and methodological contexts to better understand the protective role of peer support.

Nigerian Studies

Several Nigerian studies have examined aspects of childhood adversity, social support, and adolescent psychological well-being, providing valuable insights into these relationships. Akinwale (2023) reported a significant association between adverse childhood experiences and psychological well-being among 378 emerging adults in a rural community in Lagos State using Ryff's Psychological Well-being Scale. The findings revealed that most dimensions of childhood adversity made significant contributions to psychological well-being, except verbal and physical abuse.

Similarly, Ogunbowale et al. (2025) found a statistically significant relationship between adverse childhood experiences and self-esteem among 300 in-school adolescents in Ibadan, suggesting that the effects of childhood adversity remain evident during adolescence within the local context. Research has also highlighted the protective role of supportive environments. Adewuya et al. (2026) reported that increased school-based protective factors were associated with a 42–54% reduction in the risk of mental health problems among adolescents. Furthermore, adolescents with high levels of protective resources reported significantly lower levels of depression, even when they had experienced multiple adverse childhood events.

Likewise, studies conducted in Ilorin and Calabar have consistently demonstrated the positive influence of social support on adolescent mental health. Ajao et al. (2024) found that peer-inclusive social support independently predicted higher psychological well-being ($\beta = .306$), while Edet et al. (2024) reported that family affluence was no longer significantly associated with depressive symptoms or self-esteem when social support was included as a covariate. Collectively, these Nigerian studies highlight the importance of both adverse childhood experiences and protective social resources in shaping adolescent mental health outcomes. However, empirical studies examining childhood adversity, positive peer support, and psychological well-being concurrently among adolescents in Ibadan Metropolis remain scarce. Consequently, the interactive role of positive peer support in the relationship between childhood adversity and psychological well-being warrants further investigation.

THEORETICAL FRAMEWORK

This study is primarily anchored on the Stress-Buffering Model of Social Support, with Resilience Theory serving as a complementary framework. Together, these theories provide a comprehensive explanation of how adverse childhood experiences influence adolescent psychological functioning and how positive peer support may promote adaptive outcomes despite such adversity.

Stress-Buffering Model of Social Support

The Stress-Buffering Model of Social Support, proposed by Cohen and Wills (1985), posits that social support reduces the negative impact of stressful life experiences on individuals' physical and psychological well-being. According to the model, supportive relationships help individuals interpret stressful situations in less threatening ways while providing emotional, informational, and practical resources that facilitate effective coping. Rather than eliminating stress, social support functions by buffering its harmful effects and enhancing individuals' capacity to manage challenging circumstances.

Within the context of the present study, childhood adversity is conceptualised as a chronic and cumulative source of stress that may compromise adolescents' psychological well-being. Positive peer support is viewed as an important social resource that provides acceptance, encouragement, companionship, and emotional reassurance during difficult experiences. Consequently, adolescents who perceive higher levels of peer support are expected to report greater psychological well-being than those who perceive lower levels of support. The model further suggests that supportive peer relationships may weaken the negative effects of childhood adversity on psychological functioning by enhancing adolescents' coping abilities (Cohen & Wills, 1985).

Resilience Theory

Resilience Theory provides an additional perspective for understanding why some adolescents demonstrate positive adaptation despite experiencing significant adversity. Masten (2001) and Ungar (2013) define resilience as the process of achieving positive adaptation in the face of serious developmental challenges or stressful life experiences. Contemporary perspectives on resilience emphasise that resilience is not solely an individual characteristic but rather the result of interactions between personal strengths and environmental resources. This perspective highlights the importance of supportive social environments, including family, school, and peer relationships, in fostering resilience. Positive peer support serves as a critical protective factor by providing emotional security, social connectedness, and constructive feedback that facilitate healthy psychological development. As a result, adolescents who have experienced adverse childhood events may still achieve positive psychological outcomes when they have access to supportive social environments that promote resilience (Masten, 2001; Ungar, 2013).

Relevance of the Theories to the Study

Together, the Stress-Buffering Model of Social Support and Resilience Theory provide a strong theoretical foundation for the present study. The Stress-Buffering Model explains how peer support may reduce the negative impact of childhood adversity on psychological functioning, while Resilience Theory emphasises the capacity of supportive peer relationships to promote positive adaptation despite adverse experiences. Collectively, these frameworks support the proposition that childhood adversity is likely to be associated with poorer psychological well-being, whereas positive peer support is expected to function as a protective factor that enhances adolescents' psychological functioning and well-being.

METHODOLOGY

Research Design

This study adopted a descriptive cross-sectional survey design using a quantitative research approach. The design was considered appropriate because it enabled the collection of data from adolescents at a single point in time to examine the relationships among childhood adversity, positive peer support, and psychological well-being. Furthermore, the design facilitated the assessment of the predictive contributions of childhood adversity and positive peer support to psychological well-being, as well as the examination of the moderating role of positive peer support in the relationship between childhood adversity and psychological well-being.

Area of the Study

The study was conducted in Ibadan Metropolis, Oyo State, Nigeria. Ibadan Metropolis is one of the largest urban centres in Southwestern Nigeria and comprises five Local Government Areas: Ibadan North, Ibadan North-East, Ibadan North-West, Ibadan South-East, and Ibadan South-West. The metropolis is characterised by a heterogeneous adolescent population with diverse socio-economic and family backgrounds, making it an appropriate setting for examining factors associated with adolescents' psychological well-being.

Population of the Study

The target population for this study comprised senior secondary school students (SS I–III) in Ibadan Metropolis, Oyo State. Adolescence is a developmental stage characterised by significant cognitive, emotional, and social changes, making it particularly relevant for examining the influence of childhood adversity and peer relationships on psychological well-being.

Sample Size and Sampling Technique

A total of 200 adolescents participated in the study. A multistage sampling technique was employed in selecting the participants. In the first stage, Local Government Areas within Ibadan Metropolis were selected using simple random sampling. In the second stage, senior secondary schools were selected from the chosen Local Government Areas. In the final stage, students were selected through simple random sampling and included in the study. This sampling procedure enhanced the representativeness of the sample and ensured that all eligible adolescents had an equal opportunity of being selected.

Instrumentation

Data were collected using a structured questionnaire consisting of four sections.

Section A collected demographic information from respondents, including age, gender, class level, and family structure.

Section B measured childhood adversity and was adapted from the Childhood Trauma Questionnaire–Short Form (CTQ-SF) developed by Bernstein and Fink (1998). The adapted scale consisted of seven items assessing respondents' exposure to adverse childhood experiences. Responses were rated on a five-point Likert scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree), with higher scores indicating greater exposure to childhood adversity.

Section C assessed positive peer support using seven adapted items designed to measure perceived emotional, informational, and instrumental support received from peers. Responses were measured on a five-point Likert scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree), with higher scores indicating higher levels of perceived peer support.

Section D assessed psychological well-being using seven items adapted from the Warwick-Edinburgh Mental Well-being Scale (WEMWBS) developed by Tennant et al. (2007). The scale measured positive psychological functioning across domains such as optimism, positive affect, emotional functioning, and life satisfaction. Responses were rated on a five-point Likert scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree), with higher scores indicating greater psychological well-being.

Validity of the Instrument

The questionnaire underwent face and content validation procedures to ensure adequate representation of the constructs being measured. Experts in Educational Psychology and Measurement and Evaluation assessed the instrument for clarity, relevance, and appropriateness. Their recommendations were incorporated into the final version of the questionnaire before it was administered to the study participants.

Reliability of the Instrument

To determine the reliability of the adapted instruments, a pilot study was conducted among adolescents from

a secondary school outside the study area but with characteristics similar to those of the target population. Cronbach's alpha coefficient was used to assess the internal consistency of the scales.

The reliability coefficient obtained for the childhood adversity scale was 0.79, while coefficients of 0.86 and 0.87 were obtained for the positive peer support and psychological well-being scales, respectively. These

values exceeded the recommended threshold of 0.70, indicating satisfactory internal consistency and reliability of the instruments.

Procedure for Data Collection

Prior to data collection, permission to conduct the study was obtained from the appropriate school authorities. Participants were informed about the purpose of the study, the voluntary nature of participation, and the confidentiality of the information provided. Appropriate informed consent and assent procedures were observed before the administration of the questionnaires. The questionnaires were administered by the researcher and trained research assistants during school hours. Participants completed the questionnaires independently, and all completed copies were collected immediately after administration to minimise non-response and missing data.

Ethical Considerations

Participation in the study was entirely voluntary, and respondents were informed of their right to withdraw from the study at any stage without any negative consequences. Participants' anonymity and confidentiality were maintained by ensuring that no personally identifiable information was collected. All data obtained were securely stored and used solely for research purposes.

Method of Data Analysis

Data were analysed using the Statistical Package for the Social Sciences (SPSS) Version 29. Descriptive statistics, including frequencies, percentages, means, and standard deviations, were used to summarise respondents' demographic characteristics and the study variables.

Pearson Product-Moment Correlation was employed to examine the relationships among childhood adversity, positive peer support, and psychological well-being. Hayes' PROCESS Macro Version 5 (Model 1) was used to test the predictive effect of childhood adversity on psychological well-being and to examine the moderating role of positive peer support in the relationship between childhood adversity and psychological well-being. All hypotheses were tested at the 0.05 level of significance.

RESULT

This section presents the findings of the study in line with the research objectives and research questions. The results are presented under respondents' demographic characteristics, descriptive statistics of the study variables, Pearson Product-Moment Correlation analyses, and the moderation analysis. The analyses were performed by the Statistical Package for the Social Sciences (SPSS) version 29 and Hayes' PROCESS Macro version 5.

The following table shows a summary of the demographic characteristics of the respondents.

Twenty adolescents were excluded in the study. The basic demographic data of the respondents are shown in Table 1.

Table 1 Demographic Characteristics of the Respondents (N = 200)

Variable	Category	Frequency	Percentage (%)
Age	13-15 years	116	58.0
	16 years and above	84	42.0
Gender	Male	81	40.5

	Female	119	59.5
Class	SS1	59	29.5
	SS2	60	30.0
	SS3	81	40.5
Family Structure	Living with parents	123	61.5
	Living with one parent	32	16.0
	Living with guardians	13	6.5
	Other	32	16.0

As presented in Table 1, the majority of the respondents (116; 58.0%) were between 13 and 15 years of age, while 84 (42.0%) were aged 16 years and above. Female respondents constituted a larger proportion of the sample, accounting for 119 (59.5%), whereas 81 (40.5%) were males. With respect to class level, 81 (40.5%) of the respondents were in Senior Secondary School III (SS3), followed by 60 (30.0%) in SS2 and 59 (29.5%) in SS1. Regarding family structure, most respondents (123; 61.5%) lived with both parents, while 32 (16.0%) lived with one parent, another 32 (16.0%) reported other living arrangements, and 13 (6.5%) lived with guardians.

Research Question One

Is there an association between childhood adversity and psychological well-being in Adolescents in Ibadan metropolis, Nigeria?

To answer this research question, descriptive statistics and Pearson Product-Moment Correlation analysis were conducted. The results are presented in Tables 2 and 3.

Table 2 Descriptive Statistics for Childhood Adversity and Psychological Well-being (N = 200)

Variable	Mean	Standard Deviation
Childhood Adversity	21.21	2.13
Psychological Well-being	17.03	6.63

Table 2 shows that the respondents had a mean score of 21.21 (SD = 2.13) on childhood adversity and a mean score of 17.03 (SD = 6.63) on psychological well-being.

Table 3 Pearson Product-Moment Correlation between Childhood Adversity and Psychological Well-being

Variables	1	2
1. Childhood Adversity	1	
2. Psychological Well-being	-.113	1
p-value	.111	

The Pearson Product-Moment Correlation analysis presented in Table 3 indicates that childhood adversity was negatively related to psychological well-being (r = -.113). However, the relationship was not statistically significant (p = .111). This finding suggests that although higher levels of childhood adversity were associated with lower levels of psychological well-being, the observed relationship was weak and could not be considered statistically significant based on the correlation analysis.

Research Question Two

Is there any relationship between positive peer support and psychological well-being among the adolescent in Ibadan metropolis, Nigeria?

Descriptive statistics and Pearson Product-Moment Correlation analysis were conducted to determine the relationship between positive peer support and psychological well-being.

Table 4 Descriptive Statistics for Positive Peer Support and Psychological Well-being (N = 200)

Variable	Mean	Standard Deviation
Positive Peer Support	18.33	7.24
Psychological Well-being	17.03	6.63

The descriptive statistics in Table 4 indicate that the respondents recorded a mean score of 18.33 (SD = 7.24) on positive peer support and a mean score of 17.03 (SD = 6.63) on psychological well-being.

Table 5 Pearson Product-Moment Correlation between Positive Peer Support and Psychological Well-being

Variables	1	2
1. Psychological well-being	1	
2. Positive peer support	.700**	1
p -value	< .001	

Note. Correlation is significant at the 0.01 level (2-tailed).

As shown in Table 5, there was a strong positive and statistically significant relationship between positive peer support and psychological well-being (r = .700, p < .001). This finding indicates that adolescents who reported higher levels of positive peer support also reported higher levels of psychological well-being. The result suggests that positive peer support is positively associated with adolescents' psychological well-being.

Research Question Three

What is the moderating effect of positive peer support between childhood adversity and psychological well-being of adolescents in Ibadan Metropolis, Nigeria?

To answer this research question, Hayes' PROCESS Macro Version 5 (Model 1) with HC3 heteroscedasticity-consistent standard errors was employed. The results are presented in Table 6.

Table 6 Moderation Analysis of Positive Peer Support on the Relationship between Childhood Adversity and Psychological Well-being

Predictor	B	SE (HC3)	t	p
Childhood Adversity	-0.3226	0.1269	-2.542	.012
Positive Peer Support	0.6333	0.0504	12.564	< .001
Childhood Adversity × Positive Peer Support	-0.0349	0.0192	-1.815	.071

Table 6 Model Summary for the Moderation Analysis Predicting Psychological Well-being

R	R^2	F	df1	df2	p
.7109	.5053	68.13	3	196	< .001

The results of the moderation analysis showed that the overall regression model was statistically significant, $F_{(3, 196)} = 68.13$, $p < .001$, accounting for about 50.5% of the variance in psychological well-being ($R^2 = .5053$). Psychological well-being was significantly and negatively related to childhood adversity (B = -0.3226, SE = 0.1269, t = -2.542, p = .012), meaning that childhood adversity was associated with a decrease in adolescents' psychological well-being. Positive peer support was also a strong positive predictor of psychological well-being (B = 0.6333, SE = 0.0504, t = 12.564, $p < .001$), meaning that higher levels of positive peer support were associated with higher psychological well-being scores for adolescents.

The relationship between childhood adversity and positive peer support was not statistically significant, however (B = -0.0349, SE = 0.0192, t = -1.815, p = .071). The finding here suggests that there was no significant moderation by positive peer support between children's exposure to adverse events and the psychological well-being of adolescents in Ibadan Metropolis. Positive peer support was significantly associated with psychological well-being independent of childhood adversity, but did not significantly reduce the impact of childhood adversity on psychological well-being in adolescents. Thus, the hypothesized moderating effect of positive peer support was not supported by the data.

DISCUSSION OF FINDINGS

The present study investigated the predictive effects of childhood adversity and positive peer support on the psychological well-being of adolescents in Ibadan Metropolis, Nigeria. It also examined the moderating role of positive peer support in the relationship between childhood adversity and psychological well-being.

The first finding revealed that childhood adversity was a significant predictor of adolescents' psychological well-being. Although the bivariate correlation between childhood adversity and psychological well-being was not statistically significant, childhood adversity emerged as a significant negative predictor of psychological well-being when positive peer support was included in the regression model. This finding suggests that greater exposure to adverse childhood experiences is associated with lower levels of psychological well-being among adolescents. Childhood adversity may impair emotional functioning, self-esteem, and adaptive coping capacities, thereby limiting adolescents' ability to experience positive psychological outcomes. This finding supports the Stress-Buffering Model of Social Support (Cohen & Wills, 1985), which posits that adverse life experiences function as stressors capable of undermining psychological functioning, particularly when adequate social support is lacking.

The finding is also consistent with previous empirical evidence. Leiva et al. (2022) reported that adolescents exposed to adverse childhood experiences consistently demonstrated lower levels of subjective well-being than those without such experiences. The study further revealed a cumulative effect, whereby exposure to a

greater number of adverse experiences resulted in progressively lower levels of well-being. Similarly, Balistreri and Alvira-Hammond (2016) found that each additional adverse childhood experience reduced the likelihood of adolescents reporting high levels of psychological well-being. Within the Nigerian context, Akinwale (2023) found that adverse childhood experiences significantly predicted poorer psychological well-being among emerging adults, while Ogunbowale et al. (2025) reported significant associations between adverse childhood experiences, emotional regulation difficulties, and reduced self-esteem among adolescents in Ibadan. The consistency of these findings across different contexts reinforces the view that childhood adversity remains a significant developmental risk factor with long-term implications for adolescents' psychological functioning.

The second finding revealed a significant positive relationship between positive peer support and psychological well-being among adolescents. Adolescents who reported higher levels of emotional, informational, and interpersonal support from peers also reported higher levels of psychological well-being. This finding underscores the developmental importance of peer relationships during adolescence, a period in which peer interactions increasingly influence emotional adjustment, identity formation, and social competence. Supportive friendships provide opportunities for emotional expression, reassurance, acceptance, and constructive feedback, all of which contribute to healthy psychological functioning.

This finding is consistent with the Stress-Buffering Model of Social Support (Cohen & Wills, 1985), which proposes that social support promotes positive psychological outcomes by helping individuals manage stressful experiences. It also aligns with Resilience Theory (Masten, 2001; Ungar, 2013), which emphasises that positive developmental outcomes emerge through interactions between individuals and supportive environmental resources. The present finding corroborates the work of Affuso et al. (2024), who found a reciprocal relationship between peer support and psychological well-being over time, suggesting that supportive peer relationships enhance psychological well-being while psychologically healthy adolescents are more likely to develop positive peer relationships. Similarly, Kholiq et al. (2026) identified peer support as a strong predictor of psychological well-being among adolescents. Roach (2018) and Letkiewicz et al. (2023) also concluded that peer relationships characterised by trust, warmth, and reciprocity significantly contribute to adolescents' psychological adjustment. Within Nigeria, Ajao et al. (2024) and Edet et al. (2024) reported that peer-inclusive social support was associated with improved psychological well-being and reduced depressive symptoms among adolescents. Collectively, these findings confirm the critical role of positive peer relationships in promoting adolescent psychological health.

The third finding revealed that positive peer support did not significantly moderate the relationship between childhood adversity and psychological well-being. Although positive peer support independently contributed to improved psychological well-being, it did not significantly reduce the negative impact of childhood adversity on adolescents' psychological functioning. This finding suggests that while supportive peer relationships directly enhance psychological well-being, they may not be sufficient to offset the enduring effects of adverse childhood experiences. This finding is consistent with previous research, including the Australian longitudinal study reviewed in the empirical literature, which found that positive peer interactions did not significantly buffer the relationship between adverse childhood experiences and later psychological difficulties, although negative peer interactions intensified these outcomes.

However, the present finding contrasts with the work of Scheuplein and van Harmelen (2022), who proposed that high-quality friendships may reduce psychological stress responses among adolescents exposed to adverse childhood experiences. It also differs from findings reported in studies conducted among Chinese adolescents, where peer support significantly moderated the effects of adverse life events on psychological adjustment. These inconsistencies may be attributable to contextual differences in cultural environments, measurement approaches, the severity of adversity experienced by participants, and the availability of other protective resources such as parental support, school connectedness, and community resilience. Consequently, peer support alone may be insufficient to counteract the long-term developmental consequences of childhood adversity, particularly in cases involving multiple or severe adverse experiences. Rather, psychological well-being may depend on the cumulative influence of multiple protective systems operating simultaneously.

Implications of the Study

The findings of this study have important theoretical, practical, and policy implications.

From a theoretical perspective, the findings provide partial support for both the Stress-Buffering Model of Social Support and Resilience Theory. While positive peer support significantly enhanced adolescents' psychological well-being, it did not significantly moderate the relationship between childhood adversity and psychological well-being. This suggests that positive peer support may function primarily as a direct promotive factor rather than as a protective buffer against the effects of childhood adversity. Consequently, the findings contribute to a more nuanced understanding of the mechanisms through which social support influences adolescent psychological well-being.

From a practical perspective, the findings highlight the need to promote positive peer relationships within secondary schools. School counsellors, psychologists, and teachers should develop programmes that encourage peer mentoring, cooperative learning, social-emotional learning (SEL), and other forms of positive peer interaction. Such interventions may enhance adolescents' psychological well-being and contribute to the creation of supportive school environments.

The findings also underscore the importance of early identification and intervention for adolescents who have experienced childhood adversity. Strengthening school-based screening, counselling, and referral systems may facilitate timely psychosocial support and help prevent the persistence of psychological difficulties associated with adverse childhood experiences.

From a policy perspective, the findings emphasise the need to integrate adolescent mental health promotion into school health programmes and educational policies. Policies aimed at strengthening counselling services, psychosocial support systems, and child protection initiatives are likely to contribute to improved psychological outcomes among adolescents.

RECOMMENDATIONS

Based on the findings of this study, the following recommendations are made:

- School counsellors should develop and implement evidence-based psychosocial interventions aimed at identifying and supporting adolescents who have experienced childhood adversity.
- Secondary schools should establish structured peer support programmes, including peer mentoring schemes and social-emotional learning (SEL) initiatives, to strengthen supportive peer relationships among adolescents.
- Parents and caregivers should be educated about the long-term psychological effects of adverse childhood experiences and encouraged to create nurturing home environments that promote healthy adolescent development.
- Educational policymakers should strengthen school-based mental health services by increasing the availability of trained counsellors and psychologists within secondary schools.
- Future studies should examine additional protective factors such as family support, teacher support, school connectedness, and community resilience to provide a more comprehensive understanding of adolescent adaptation following childhood adversity.
- Longitudinal research should be conducted to explore the causal pathways linking childhood adversity, peer support, and psychological well-being throughout adolescence.

CONCLUSION

This study examined the influence of childhood adversity and positive peer support on the psychological well-being of adolescents in Ibadan Metropolis, Nigeria. The findings revealed that childhood adversity significantly and negatively predicted psychological well-being, whereas positive peer support significantly and positively predicted psychological well-being among adolescents. However, positive peer support did

not significantly moderate the relationship between childhood adversity and psychological well-being, suggesting that its influence operates primarily as a direct promotive factor rather than a buffering mechanism.

The findings confirm that adverse childhood experiences continue to exert significant effects on adolescents' psychological functioning and that positive peer relationships represent an important developmental asset. Although peer support may not fully mitigate the psychological consequences of childhood adversity, supportive peer relationships remain essential for promoting positive psychological health among adolescents.

Overall, this study contributes to the growing body of literature on adolescent mental health in Nigeria by providing empirical evidence on the roles of childhood adversity and positive peer support in shaping psychological well-being. The findings offer valuable insights for the development of interventions and policies aimed at addressing childhood adversity while strengthening psychosocial resources within school environments to promote positive adolescent development.

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