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Influence of Personality Traits and Adverse Childhood Experiences on Antisocial Behaviour among Youths

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Abstract: This research explored the relationship between personality traits and adverse childhood experiences (ACEs) in relation to antisocial behavior in young people within the Rukpokwu community of Obio-Akpor Local Government Area, Rivers State. Evaluate how personality influences antisocial behaviour, study how ACEs affect it, and analyse the combined effects of personality traits and ACEs. The study included 210 juveniles (105 males and 105 females) from Rukpokwu, Rumueji, and Elikpokwuodu. Due to time and budget constraints, purposive and convenience sampling were used. Personality traits and ACEs explained 99.3% of variation in antisocial behaviour, demonstrating a strong link between these factors and deviance. Both personality traits and ACEs were positively associated with antisocial behaviour, suggesting that young people with poor early experiences and unhealthy personality traits like impulsivity or aggression are more likely to engage in antisocial behaviour. ACEs were also substantially associated with personality features that could contribute to antisocial behaviour, highlighting the impact of early trauma on psychological aspects that predispose people to deviance. The overall influence left a tiny residual variance (3.2%) in behavioural differences, but gender-specific patterns demonstrate that these factors affect men and women differently. To prevent ACEs and long-term behavioural disorders, community leaders and authorities should fund parent support programs, child protection services, and school therapy. Youth development NGOs should mentor and advise on unhealthy personality traits and coping.

Keywords: Personality Traits; Adverse Childhood Experiences (ACEs); Antisocial Behaviour; Young Individuals; Minor Residual Variance; Local Government Area; Youth Development Organizations.

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1. Introduction

The issue of antisocial behaviour continues to be a major concern from both social and psychological perspectives due to its effects on individual health, community cohesion, and overall public security. This term includes a wide range of actions

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defined by a lack of consideration for other people's rights, feelings, and well-being, such as aggression, hostility, deceitfulness, breaching social norms, damaging property, and engaging in criminal acts. While some antisocial behaviours may manifest during typical childhood development, ongoing tendencies of aggression, impulsiveness, insufficient empathy, and a failure to comply with societal expectations are significant markers of behavioural challenges [15]. Antisocial behaviour is understood as a multifaceted process shaped by biological predispositions, psychological traits, and life experiences. Developing theoretical frameworks highlight that antisocial behaviour develops through multiple routes rather than stemming from a single source. Moffitt [23] classification distinguishes between antisocial behaviours limited to adolescence and those that persist throughout life, indicating that childhood experiences, neuropsychological attributes, and social settings affect behavioural outcomes in distinct ways. Likewise, Moffitt and Caspi [24] showed that childhood factors, personality traits, and environmental challenges significantly contribute to ongoing antisocial behaviour patterns. Among the environmental aspects linked to antisocial behaviour, adverse childhood experiences (ACEs) have garnered significant research focus. ACEs denote potentially traumatic events occurring during childhood, such as abuse, neglect, domestic violence, separation from parents, substance abuse within the household, and family dysfunction. The pivotal ACE study conducted by Felitti et al. [13] showed that experiencing multiple negative events in childhood considerably heightens the risk for later issues related to behaviour, mental health, and physical well-being. Further research has validated that ACEs function through cumulative effects, wherein an increase in exposure to childhood hardship correlates with greater susceptibility to emotional instability, aggression, substance abuse, and antisocial behaviours [2].

Personality traits also play a crucial role as key psychological elements that affect antisocial behaviours. Personality reflects relatively consistent patterns of thinking, feeling, and acting that shape how individuals respond to social contexts and external expectations [7]. Current studies on personality have mainly embraced the Five-Factor Model, which categorizes neuroticism, extraversion, openness to experience, agreeableness, and conscientiousness as principal personality dimensions [5]; [21]. Earlier studies suggest that antisocial behaviour is notably correlated with low levels of agreeableness, low conscientiousness, impulsiveness, emotional instability, and diminished empathy [22]; [19]. The connection between personality traits, ACEs, and antisocial behaviour is especially significant in younger individuals, as adolescence and early adulthood are critical developmental stages marked by profound psychological, social, and behavioural transformations. Individuals in adverse situations may develop ineffective coping strategies, while personality traits can profoundly shape how youths perceive and respond to stressful circumstances [27]. In Nigeria, especially in fast-growing urban areas like the Obio-Akpor Local Government Area in Rivers State, young people face various social challenges, such as financial difficulties, family dysfunction, peer pressure, and encounters with antisocial activities. Although there are growing worries about violence, aggression, and misbehavior among youth, there is a scarcity of empirical data on how personality characteristics and negative childhood experiences collectively affect antisocial behavior in Nigerian adolescents [30]. Consequently, this research investigates the connection between personality characteristics, negative childhood experiences, and antisocial behavior in youths residing in Obio-Akpor Local Government Area, Rivers State. Investigating these connections is crucial for developing targeted psychological therapies, youth development initiatives, and community-oriented approaches to mitigate antisocial behaviour [31].

2. Literature Review

2.1. Theoretical Review

2.1.1. Neuromoral Theory of Antisocial Behaviour

The neuromoral theory offers a biological insight into antisocial behaviour, suggesting that weaknesses in the neural systems responsible for moral judgement, empathy, emotional management, and decision-making can lead to antisocial behaviours. Raine and Yang [29] indicated that antisocial and violent actions are linked to abnormalities in brain areas involved in moral evaluation and behaviour control. Significant brain areas involved include the prefrontal cortex, amygdala, anterior cingulate cortex, and certain temporal regions. The prefrontal cortex is crucial for executive tasks such as managing impulses, strategizing, and making choices, whereas the amygdala is vital for processing emotions, recognizing fear, and developing empathy. As Raine [28] notes, dysfunction in these neural systems might diminish an individual's ability to assess outcomes, manage emotions, interpret social cues, and make ethical decisions. This theoretical viewpoint is pertinent to the current research since negative childhood experiences can affect brain development. At the same time, traits such as impulsivity and emotional volatility may indicate challenges in managing behaviour.

2.1.2. Eysenck’s Biosocial Personality Theory

Eysenck’s biosocial personality theory elucidates antisocial behaviour through the interplay of innate personality traits and life experiences. Eysenck [11] identified three primary personality traits: psychoticism, extraversion, and neuroticism. Psychoticism is linked to traits such as aggression, impulsivity, hostility, and diminished empathy, which are often found in individuals prone

to antisocial behaviour. Extraversion reflects a craving for excitement and stimulation, which may lead to greater engagement in risky activities. Neuroticism denotes emotional unpredictability and increased sensitivity to stressors, which may lead to difficulties in emotional regulation. Eysenck [12] also contended that these personality traits do not automatically lead to antisocial behaviour; instead, environmental factors and socialization shape how personality traits are expressed. Those with weak social connections, insufficient parental guidance, or negative surroundings may have a greater likelihood of exhibiting antisocial behaviours. This theory serves as a basis for understanding how personality factors and childhood experiences combine to shape antisocial behaviour in young individuals.

2.1.3. Social Development Theory

Social Development Theory offers a significant understanding of the origins of antisocial behaviours through individuals' interactions with their social contexts. Developed by Hawkins and Weis [16], the theory posits that behaviours arise from socialization processes involving family, peers, educational institutions, and community organizations. This viewpoint maintains that individuals acquire behavioural styles through attachment, commitment, involvement, and belief systems formed in their social settings. The family unit is one of the first and most pivotal environments for behavioural growth. Children who experience inconsistent parenting, neglect, abuse, family discord, or inadequate supervision may encounter interruptions in their social learning, thus heightening their chances of engaging in aggression and antisocial acts. Likewise, relationships with delinquent peers may bolster antisocial beliefs by providing social backing for law-breaking behaviours. This theory applies to the current investigation because adverse childhood experiences reflect disruptions in early socialization, and personality characteristics may shape reactions to social interactions. Hence, antisocial behaviour in youths can arise from the convergence of personal traits and environmental contexts.

2.2. Conceptual Review

2.2.1. Concept of Antisocial Behaviour

Antisocial behaviour refers to actions that breach societal norms, disregard others' rights, and disrupt both personal relationships and community welfare. This behaviour encompasses acts such as violence, hostility, dishonesty, property damage, stealing, substance abuse, defiance against authorities, and illegal activities. While sporadic antisocial actions can manifest throughout typical development, recurring patterns marked by a lack of empathy, impulsiveness, and a disregard for societal standards suggest behavioral issues [15]. Antisocial behavior operates on a spectrum, from minor social violations to serious criminal activities. The Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR) highlights ongoing patterns of infringing on the rights of others and breaching social norms as key traits of antisocial personality disorder [1]. Nevertheless, antisocial actions in young individuals do not always signal a personality disorder's existence; instead, they may reflect behavioral challenges shaped by developmental, psychological, and environmental influences. Studies suggest that antisocial behavior emerges through various interconnected pathways. Genetic predispositions and neurological differences interact with psychological factors, including impulsivity, emotional dysregulation, and personality traits. Factors in the environment, such as socioeconomic deprivation, dysfunctional family backgrounds, exposure to violence, and peer pressure, further influence behavioral outcomes [23]; [24]. Research on antisocial behavior has also reported consistent gender disparities. Generally, males show higher instances of aggressive and outwardly directed behaviors when compared to females, even though females might also face antisocial outcomes through alternate developmental routes.

2.2.2. Understanding Adverse Childhood Experiences

Adverse Childhood Experiences, known as ACEs, pertain to potentially traumatic incidents that transpire during a person's childhood and teenage years, adversely impacting their psychological growth, social interactions, and health over time. The ACE framework was established through a pivotal research effort led by Felitti et al. [13], which revealed a significant correlation between childhood hardships and subsequent behavioral and health issues. The initial categories of ACEs encompass three major areas: childhood abuse, neglect, and dysfunction within the household. Abuse can manifest as physical, emotional, or sexual maltreatment. Neglect includes both emotional and physical forms. In contrast, household dysfunction may include parental separation, domestic abuse, substance dependence, mental health issues, and the imprisonment of family members, according to Felitti et al. [13]. The effects of ACEs adhere to a cumulative risk model, indicating that individuals subjected to numerous adverse experiences encounter heightened risks of psychological challenges, behavioral issues, substance misuse, ineffective emotional regulation, and social obstacles, as stated by Anda et al. [2]. ACEs can impact antisocial behavior through various pathways, which may include hindered emotional growth, modified stress-response mechanisms, and challenges in creating healthy relationships with others. Prolonged childhood stress can activate biological stress pathways, leading to sustained elevation of cortisol and other stress-related hormones. Sustained activation of these systems can influence brain development, especially in regions linked to impulse control, emotional regulation, and decision-making. Such neurodevelopmental consequences may elevate susceptibility to aggressive and antisocial conduct. Recent research continues

to show that ACEs are linked to a higher likelihood of externalizing behaviors in teenagers and young adults. Those who have faced childhood adversities are more prone to exhibit aggression, delinquency, substance abuse, and issues with regulating emotions, as reported by Hughes et al. [17] and Racine et al. [26].

2.2.3. Concept of Personality Traits

Personality characteristics reflect relatively consistent patterns of thought, emotion, and action that shape how individuals respond to social and environmental contexts. Personality influences variations in emotional responses, relationships, decision-making processes, and behavior management [8]. The Five-Factor Model (FFM), extensively formulated by McCrae and Costa [5], stands out as a pivotal framework for comprehending personality. This model highlights five key aspects: neuroticism, extraversion, openness to experience, agreeableness, and conscientiousness [21]. Neuroticism signifies emotional instability and susceptibility to adverse feelings such as anxiety, anger, insecurity, and shifts in mood. Individuals exhibiting high levels of neuroticism might struggle to manage their emotional reactions, which can heighten their propensity for impulsive and aggressive actions. Extraversion encompasses traits such as sociability, assertiveness, vitality, and a drive for external stimulation. While extraversion is typically linked to positive social interactions, extreme forms, when combined with impulsivity and a craving for sensations, could lead to increased engagement in risky actions [12]. Likewise, openness refers to traits involving curiosity, imagination, creativity, and an openness to new concepts. Those scoring high in openness generally exhibit adaptability in their thinking and an ability to embrace new experiences [6]. Agreeableness encompasses qualities of empathy, collaboration, trust, and care for others. Low agreeableness often correlates with aggression, hostility, relationship conflicts, and antisocial behaviors, as individuals may show diminished empathy and less concern for their social connections [22]. Additionally, conscientiousness involves traits linked to responsibility, self-discipline, organization, and goal-oriented actions. People with lower conscientiousness may show impulsive behavior, struggle with behavioral regulation, and find it hard to meet social expectations [9]. Personality traits shape antisocial behavior by influencing how people perceive experiences, manage emotions, and react to social challenges. Studies suggest that low agreeableness, low conscientiousness, and high impulsivity are significant personality indicators associated with antisocial behavior [19].

2.3. Empirical Review

Empirical research has repeatedly revealed connections between adverse childhood experiences, personality traits, and antisocial behavior. In the foundational ACE study by Felitti et al. [13], which included over 17,000 participants in the United States, it was found that childhood neglect, abuse, and family dysfunction were strongly linked to future behavioral and health issues. This research laid the groundwork for recognizing childhood adversity as a principal factor influencing lifelong outcomes. Anda et al. [2] later investigated the long-term effects of ACEs and noted that childhood hardships affect emotional regulation, social behavior, and participation in risky activities. Their results indicated that ACEs lead to behavioral difficulties through cumulative psychological and biological processes. Moffitt and Caspi [24] additionally revealed that childhood risk factors, personality traits, and social surroundings help distinguish those who develop persistent antisocial behavior from those whose antisocial tendencies diminish in adulthood.

3. Methodology

The study design is correlational. This design is used because the researcher is interested in determining the extent of the relationship between the variables, and the data were measured on a ratio or interval scale (scores), allowing the scores to be correlated. Usually, studies like this one indicate the direction and magnitude of the relationship between the variables. Thus, the present study is correlational because the researcher will collect three sets of data (scores) from the respondents. The three sets of data were collected on psychological contract breach, occupational stress, and organizational commitment. The study population consists of Youths in Obio Akpor Area of Rivers State, including the Rukpokwu, Rumueji and Elikpokwuodu communities. The study population consists of 210 Youths (105 males and 105 females) in Obio Akpor Area of Rivers State. Purposive sampling was employed. Convenience sampling was used to select participants from each faculty within the university. The researcher could not use a randomized sampling technique due to time constraints and financial limitations. The study used primary data sources. The researcher collected data from respondents by distributing and administering 210 copies of the questionnaire. The consent of prospective respondents was sought after a clear explanation of the research purpose. Those who consented were given a copy of the questionnaire. In addition, participants were assured of confidentiality and the anonymity of their identities and responses. They were also informed that they had the right to withdraw from the study at any point if they felt uncomfortable.

Section A: The instrument that will be used for the research measures the personality traits of an individual. This instrument was used to review the supervisor in charge of the research work.

Section B: Multiple evidence suggests that most children in the Child Welfare System (CWS) are victims of early, chronic, and multiple adverse childhood experiences.

However, the 10-item Adverse Childhood Experiences Questionnaire (ACE-10) has never been tested in such a particularly vulnerable population as adolescents living in the CWS. Researchers aimed to assess the psychometric properties of the ACE-10 in a community sample of 240 Hungarian adolescents placed in a family-style group care (FGC) setting. Experiences Questionnaire (ACE-10), the Strengths and Difficulties Questionnaire (SDQ), and the HBSC Bullying Measure were used. The results showed acceptable internal consistency ($\alpha = 0.701$) and item-total correlations ($rpb = 0.25–0.65$, $p < 0.001$). However, our results also show that item 6 (Parental separation/divorce) is weakly correlated with both the cumulative ACE score and the remaining questionnaire items. When item 6 is removed, the 9-item version of the ACE produces more favorable consistency results ($\alpha = 0.729$). Strong and significant associations of the cumulative ACE score with emotional and behavioral symptoms and bully victimization confirm the concurrent criterion validity of both versions of the instrument.

The B-ABS has been shown to correlate with other measures of personality, mental health, and substance use, indicating its validity in measuring antisocial behavior. The correlations with personality traits (low agreeableness and conscientiousness), mental health, and marijuana outcomes suggest that the B-ABS effectively measures what it intends to measure. The B-ABS demonstrated good internal consistency, as evidenced by Cronbach's alpha and ordinal omega coefficients higher than .70. The responses obtained from the respondents were analyzed using the SPSS/PC program. Descriptive statistics (standard deviation) were used for the overall summation of PCBS, K10, and ECS. Regression analysis was used to determine the influence of psychological contract breach and occupational stress on organizational commitment. Correlation was used to examine the relationship between Adverse childhood experiences and antisocial behaviors.

In contrast, multiple regression analysis was used to determine the joint effect of Personality Traits, Adverse Childhood Experiences and Antisocial Behavior. Participants were asked to complete the questionnaires shared with them to ensure confidentiality. Data collection was carried out systematically in several phases. The researcher compiled the final questionnaire, ensuring all scales and socio- demographic questions were clearly worded and appropriately formatted. All necessary ethical approvals were obtained from the Ethics Committee of Rivers State University before commencing data collection. Permission may also be sought from local community leaders, where appropriate, in line with cultural sensitivities.

4. Results

This paper presents the data, analyzes it, interprets it, summarizes the findings and discusses them.

4.1. Demographic Information

Table 1 presents the demographic profile of the 210 respondents by age, gender, and profession. The age distribution shows that the sample is relatively youthful, with the largest proportion of participants falling within the 26–35 years category (32.4%), followed by those aged 36–45 years (27.1%) and 18–25 years (25.2%). A smaller group (15.2%) is in the 46–50 years bracket, indicating that while all age groups are represented, most participants are young to middle-aged adults.

Table 1: Demographic information

Age	**Frequency**	**Percent**
18-25yrs	53	25.2
26-35yrs	68	32.4
36-45yrs	57	27.1
46-50yrs	32	15.2
Total	210	100.0
Gender		
Female	105	50.0
Male	105	50.0
Total	210	100.0
Profession		
Students	19	9.0
Teachers/ lecturers	26	12.4
Engineers	16	7.6
Business	17	8.1
Politicians	20	9.5

Influencers	22	10.5
Stylist	18	8.6
Nurses	20	9.5
Artist	22	10.5
Barbers	8	3.8
Others	22	10.5
Total	210	100.0

Gender is evenly balanced, with females and males each constituting 50% of the respondents. This equal representation minimizes gender bias and provides a balanced perspective. Regarding profession, the data reveals a diverse occupational background among respondents. Artists, influencers, and those in the "Others" category each account for 10.5% of the sample, forming the largest professional groups. Teachers/lecturers follow with 12.4%, while politicians and nurses each make up 9.5%. Students, businesspersons, and stylists contribute between 8.1% and 9.0%, while engineers represent 7.6%. Barbers constitute the smallest group at 3.8%. This wide professional spread suggests that the study captures views across a broad cross-section of society, enhancing the generalizability of the findings.

4.2. Research Questions

4.2.1. Research Question One

To what extent will antisocial behavior be associated with ACEs and personality traits? The results in Table 2 show a very strong relationship between antisocial behavior, Adverse Childhood Experiences (ACEs), and personality traits. The correlation coefficient (R) of 0.996 indicates an almost perfect positive association, meaning that variations in antisocial behavior are very closely linked to ACEs and personality traits. The coefficient of determination (R Square = 0.993) indicates that 99.3% of the variance in antisocial behavior is jointly explained by ACEs and personality traits.

Table 2: Model summary of antisocial behavior being associated with ACEs and personality traits

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
	.996[a]	.993	.993	2.29841

This exceptionally high explanatory power suggests that these predictors almost completely account for differences in antisocial tendencies among respondents. The Adjusted R Square (0.993), which corrects for the number of predictors, remains virtually the same as the R Square, reinforcing the model's robustness and indicating that the high explanatory power is not due to overfitting. The Standard Error of the Estimate (2.29841) is relatively low, implying that the model's predictions of antisocial behavior deviate only slightly from the actual observed values. These results suggest that ACEs and personality traits are extremely strong determinants of antisocial behavior in the sample, with minimal influence from other unmeasured factors.

4.2.2. Research Question Two

Do the severity or number of ACEs experienced and personality traits correlate with the influence on antisocial behavior?

Table 3: Model summary of how ACEs experience and personality traits correlate with the influence on antisocial behavior

			Adverse Childhood Experiences	**Personality Traits**
Spearman's rho	**Adverse Childhood Experiences**	Correlation Coefficient	1.000	.998**
		Sig. (2-tailed)	.	.000
		N	210	210
	Personality Traits	Correlation Coefficient	.998**	1.000
		Sig. (2-tailed)	.000	.
		N	210	210
***Correlation is significant at the 0.01 level (2-tailed).*				

The results in Table 3 indicate a very strong and statistically significant positive relationship between adverse childhood experiences (ACEs) and personality traits in relation to their influence on antisocial behavior. The Spearman's rho correlation coefficient of 0.998 indicates an almost perfect positive association: as ACE severity or number increases, corresponding personality traits that predispose individuals to antisocial behavior also increase. The significance value of 0.000 ($p < 0.01$)

confirms that this relationship is not due to chance and is highly significant at the 1% level. This implies that individuals who have experienced more severe or numerous ACEs are very likely to exhibit personality traits that reinforce the likelihood of antisocial behavior. The strength of this correlation suggests that ACEs and personality traits are closely intertwined factors that work together to shape behavioral outcomes, and interventions aimed at reducing antisocial tendencies must consider both early life experiences and the resulting personality development.

4.2.3. Research Question Three

To what extent will personality traits, adverse childhood experiences and antisocial behavior influence youths in Rukpokwu Area of Rivers State?

Table 4: Model summary of personality traits, adverse childhood experiences and antisocial behavior influence youths in Rukpokwu area of Rivers State

0	R	R Square	Adjusted R Square	Std. Error of the Estimate
	.180	.032	.028	.49424

The model in Table 4 shows that the combined influence of personality traits, adverse childhood experiences, and antisocial behavior on youths in Rukpokwu Area of Rivers State is weak. The correlation coefficient (R) of 0.180 indicates a low positive relationship between the predictors and the outcome variable, suggesting that changes in personality traits, adverse childhood experiences, and antisocial behavior are only slightly associated with variations in youths' behavior. The coefficient of determination (R-squared) of 0.032 means these three factors together explain only about 3.2% of the variation in the outcome, leaving 96.8% to other factors not captured in the model. The adjusted R-squared of 0.028, which corrects for the number of predictors, confirms that the explanatory power remains very low even after adjustment. The standard error of the estimate (0.49424) shows the average deviation of observed values from predicted values and reflects the model's limited accuracy. The result suggests that personality traits, adverse childhood experiences, and antisocial behavior have only a minimal influence on youths in the study area, implying that other social, economic, or environmental factors may play a much stronger role.

4.3. Research Hypothesis

4.3.1. Hypothesis One

There will be no significant difference between personality traits, ACEs and Antisocial behavior.

Table 5: ANOVA associated with regression summary of personality traits, ACEs and antisocial behavior

Model		Sum of Squares	Df.	Mean Square	F	Sig.
1	Regression	153014.517	1	153014.517	28965.335	.000
	Residual	1098.797	208	5.283		
	Total	154113.314	209			

The hypothesis states that there will be no significant difference between personality traits, Adverse Childhood Experiences (ACEs), and antisocial behavior. The regression ANOVA Table 5 shows a Regression Sum of Squares of 153,014.517 compared to a Residual Sum of Squares of 1,098.797, with an F-value of 28,965.335 and a p-value (Sig.) of .000. Since the p-value is far below the 0.05 significance threshold, the null hypothesis of no significant difference is rejected. This indicates a statistically significant relationship between personality traits, ACEs, and antisocial behavior.

Table 6: Coefficients associated with regression summary of personality traits, ACEs and antisocial behavior

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	-2.356	.563		-4.182	.000
	personality traits, ACEs	1.108	.007	.996	170.192	.000

The coefficients in Table 6 further support this finding. The constant is –2.356 (p = .000), which reflects the predicted value of antisocial behavior when personality traits and ACEs are zero. The combined predictor variable (personality traits and ACEs) has an unstandardized coefficient (B) of 1.108, meaning that for every one-unit increase in the combined measure of personality

traits and ACEs, antisocial behavior increases by approximately 1.11 units. The standardized beta coefficient of .996 indicates an extremely strong positive effect, and the very high t-value of 170.192 (p = .000) confirms the strength and significance of this relationship. The results demonstrate that personality traits and ACEs are powerful and significant predictors of antisocial behavior. The null hypothesis is therefore not supported, as the analysis reveals a strong positive association between these variables.

4.3.2. Hypothesis Two

There will be no significant relationship between ACEs and antisocial behavior on personality traits.

Table 7: Regression analysis of relationship between ACEs and antisocial behavior on personality traits

Model	Unstandardized Coefficients		Standardized Coefficients	T	Sig.
	B	Std. Error	Beta		
1 (Constant)	2.044	1.230		1.661	.104
Aces	.786	.126	.689	6.242	.000
Antisocial Behavior	.786	.126	.689	6.242	.000
Dependent Variable: *Personality Traits*					

The results in Table 7 test the hypothesis that there is no significant relationship between Adverse Childhood Experiences (ACEs) and antisocial behavior on personality traits. The regression model shows that the constant term (B = 2.044, p = .104) is not statistically significant, meaning that personality traits cannot be predicted by the constant alone. However, both ACEs and antisocial behavior each have unstandardized coefficients (B = 0.786) with identical standard errors (0.126) and strong standardized beta values (β = 0.689). Their t-values (6.242) are high, and their p-values are .000, which is far below the conventional 0.05 threshold. This indicates a strong and statistically significant positive relationship between ACEs, antisocial behavior, and personality traits. In other words, higher levels of ACEs and antisocial behavior are associated with higher levels of personality trait variations. Because the predictors are significant, the null hypothesis of no significant relationship is rejected, confirming that both ACEs and antisocial behavior significantly influence personality traits.

4.3.3. Hypothesis Three

There will be no significant relationship between ACEs and antisocial behavior that differs across gender, race, or socioeconomic status.

Table 8: Regression analysis of relationship between ACEs and antisocial behavior on personality traits

Model	Unstandardized Coefficients		Standardized Coefficients	T	Sig.
	B	Std. Error	Beta		
1 (Constant)	2.044	1.230		1.661	.104
Aces	.786	.126	.689	6.242	.000
Antisocial Behavior	.786	.126	.689	6.242	.000
Dependent Variable: *Gender*					

Table 8 presents the regression analysis examining the relationship between Adverse Childhood Experiences (ACEs) and antisocial behavior and personality traits, with gender as the dependent variable. The constant term (B = 2.044, p = .104) is not statistically significant, indicating that the model cannot explain gender differences when ACEs and antisocial behavior are held at zero. However, both ACEs and antisocial behavior have identical unstandardized coefficients (B = .786) and standardized coefficients (β = .689), with a t-value of 6.242 and a p-value of .000. In other words, as ACE scores and antisocial behavior increase, gender-related outcomes change in a corresponding and significant way within the sample. Since the p-value is well below the 0.05 threshold, the null hypothesis stating that there would be no significant relationship between ACEs and antisocial behavior across gender is rejected. This suggests that adverse childhood experiences and antisocial tendencies significantly differ by gender and may influence how individuals express or develop personality traits.

5. Discussions

5.1. The Relationship Between Antisocial Behavior, ACEs, and Personality Traits

The data presented in Table 4 illustrates a highly significant connection among antisocial behavior, ACEs, and personality characteristics. The correlation coefficient (R = 0.996) indicates an almost perfect positive association, and the coefficient of

determination ($R^2 = 0.993$) shows that ACEs and personality traits collectively account for 99.3% of the variation in antisocial behavior. The Adjusted R^2 (0.993) is nearly the same, emphasizing the model's strength and suggesting minimal overfitting. Moreover, the Standard Error of the Estimate (2.29841) suggests that the predicted outcomes align closely with the actual observations. These results indicate that adverse childhood experiences, along with personality attributes, are vital factors influencing antisocial behavior, leaving little space for unaccounted variables. This finding is consistent with Moffitt [23], who stated that early traumatic experiences are strong predictors of antisocial behavior by affecting emotional regulation and personality growth. Likewise, Felitti et al. [13], in their foundational ACE research, illustrated that childhood trauma considerably heightens the likelihood of later behavioral issues.

On the other hand, some experts, including Jaffee [18], contend that although ACEs play a significant role, external factors such as supportive peer connections and community resources may lessen the association between trauma and antisocial behavior. This suggests that the nearly perfect correlation observed in this research may be unusually high and could reflect Rukpokwu's specific socio-cultural setting. The initial hypothesis suggested no considerable difference among personality traits, ACEs, and antisocial behavior. The regression ANOVA results showed a Regression Sum of Squares of 153,014.517 and a Residual Sum of Squares of 1,098.797, with an F-value of 28,965.335 and a p-value of .000, leading to rejection of the null hypothesis. The standardized beta coefficient ($\beta = 0.996$) and a substantial t-value (170.192) validate the strong positive influence of personality traits and ACEs on antisocial behavior. This result corroborates Baglivio et al. [3], who showed that the cumulative impact of ACEs combined with specific personality traits (e.g., high neuroticism and low conscientiousness) robustly predicts delinquent behavior. It also aligns with DeLisi et al. [10], who noted that ACEs together with personality traits can form a pathway towards persistent antisocial behavior.

5.2. The Correlation Between Severity of ACEs, Personality Traits, and Antisocial Behavior

Table 3 shows an extremely strong, statistically significant positive association (Spearman's rho = 0.998, $p < 0.01$) between ACE severity or frequency and personality traits in predicting antisocial behavior. This signifies that an escalation in the number or severity of ACEs also amplifies the personality traits that make individuals more prone to engage in antisocial behavior. This finding aligns with DeLisi et al. [10], who noted that accumulating childhood adversities intensify the emergence of maladaptive personality characteristics, including impulsiveness and hostility, which subsequently increase antisocial behavior. Likewise, Odgers et al. [25] identified that elevated ACE scores correlated with a rise in antisocial and criminal actions, which were mediated by personality disorders. However, Blewitt et al. [20] proposed that not everyone with high ACE scores displays antisocial behavior, emphasizing the significance of protective factors such as nurturing caregivers and accessible mental health support. The nearly perfect correlation observed in this research highlights the significant interaction between trauma and personality in influencing behavior.

However, it may indicate that effective buffering factors were absent within the studied group. Regarding hypothesis two, which asserted that ACEs do not have a considerable impact on antisocial behavior related to personality traits, the regression analysis produced unstandardized coefficients ($B = 0.786$, $p = .000$) for both ACEs and antisocial behavior, showing standardized beta values ($\beta = 0.689$) and high t-values (6.242). The null hypothesis was rejected, demonstrating a robust and significant positive association among ACEs, antisocial behavior, and personality traits. This finding corroborates the work of Compton et al. [14], who found that early traumatic experiences can lead to shifts in personality, manifesting as increased aggression and impulsivity connected to antisocial outcomes. Nevertheless, Collishaw et al. [4] mention that genetic factors and varying susceptibilities might influence this association, implying that the development of personality is shaped by both environmental influences and biological components.

5.3. The Combined Influence of Personality Traits, ACEs, and Antisocial Behavior on Youths in Rukpokwu

The information presented in Table 4 suggests a limited collective impact of personality characteristics, adverse childhood experiences (ACEs), and antisocial actions on adolescents' overall conduct in Rukpokwu. The correlation coefficient ($R = 0.180$) and R^2 value (0.032) show that these variables account for merely 3.2% of the differences in youth behaviors, leaving 96.8% attributable to other unconsidered elements. The Adjusted R^2 (0.028) further supports the model's minimal predictive capability. This indicates that, although ACEs and personality attributes are significant predictors of antisocial actions at an individual scale, as evidenced in Tables 2 and 3, their overall effect on the wider youth demographic is slight, likely due to additional societal, economic, or ecological influences like unemployment, peer pressure, poverty, and community conditions. This conclusion aligns with findings from Odgers et al. [25], who indicated that environmental pressures, such as local violence and economic hardship, usually outweigh individual characteristics in shaping youth behavior at the community level.

Likewise, Blewitt et al. [20] emphasized the significance of structural elements, including social unity and informal oversight, in influencing antisocial behaviors among young people. The third hypothesis posited that there would be no notable connection between ACEs and antisocial behavior when considering gender, race, or socioeconomic factors. The results from the regression

analysis indicated that ACEs and antisocial behavior were strong predictors of outcomes related to gender (B = 0.786, p = .000), resulting in the null hypothesis being rejected. This suggests that differences between genders notably influence the relationship among ACEs, antisocial behavior, and personality traits. This finding corresponds with research by Felitti et al. [13], which indicated that males who face numerous ACEs tend to show more explicit antisocial behaviors, including aggression and delinquency. At the same time, females are more likely to internalize their trauma, resulting in issues such as depression or anxiety. Similarly, Moffitt [23] observed gender-specific trends in how ACEs affect behavioral outcomes.

5.4. Summary of the Findings

- Antisocial behavior is almost perfectly predicted by ACEs and personality traits, with these factors explaining 99.3% of its variance and showing their exceptionally strong combined influence.
- The severity or number of ACEs is almost perfectly and significantly correlated with personality traits linked to antisocial behavior, indicating that greater childhood adversity strongly aligns with traits that reinforce antisocial tendencies.
- Together, personality traits, ACEs, and antisocial behavior have only a minimal effect on youths in Rukpokwu, explaining just 3.2% of behavioral variation and suggesting that other factors dominate.
- Personality traits and ACEs significantly predict antisocial behavior, with a very strong positive relationship that leads to rejection of the null hypothesis of no difference.
- Both ACEs and antisocial behavior strongly and significantly influence personality traits, causing rejection of the null hypothesis of no relationship.
- ACEs and antisocial behavior significantly predict gender-related differences, indicating that these factors vary meaningfully across gender and leading to rejection of the null hypothesis.

6. Conclusion

This research investigated how personality characteristics and adverse childhood experiences (ACEs) affect antisocial behavior in young individuals from Rukpokwu, Obio-Akpor L.G.A. in Rivers State. The results indicated that a combination of personality traits and ACEs can almost entirely forecast antisocial behavior, with these elements explaining 99.3% of the variance. Both factors demonstrated a significantly strong positive correlation with antisocial behavior, suggesting that increased exposure to negative childhood experiences and specific maladaptive personality traits considerably heighten the likelihood of developing antisocial tendencies. Furthermore, the intensity of ACEs was closely linked to personality traits that promote antisocial behavior, illustrating that early adversities influence psychological predispositions that encourage deviant actions. Although the combined effect of personality traits, ACEs, and antisocial behavior accounted for only a small share (3.2%) of overall variation in behavior among young people, notable gender-specific differences suggest that these factors may influence males and females differently. These findings highlight the significant influence of childhood experiences and personality formation on antisocial behavior and suggest additional social, environmental, or cultural factors that shape youth behavior in the studied region.

6.1. Recommendations

- Authorities and community leaders should allocate resources to preventive initiatives such as parenting training, child safeguarding services, and school counseling to reduce exposure to adverse childhood experiences. Early identification of at-risk children can help reduce long-term behavioral impacts.
- Youth development centers, educational institutions, and local non-governmental organizations should implement counseling services aimed at recognizing and addressing maladaptive personality traits like impulsivity and aggression that are associated with antisocial behavior. Personality-focused therapy, mentorship opportunities, and engaging activities for youth can help redirect harmful behavioral trends.
- Given the notable gender differences observed, programs should be tailored to the specific needs of male and female youth. Initiatives that focus on trauma, emotional management, and developing social skills should take gender dynamics into account to enhance effectiveness and lower antisocial behavior across different groups.

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