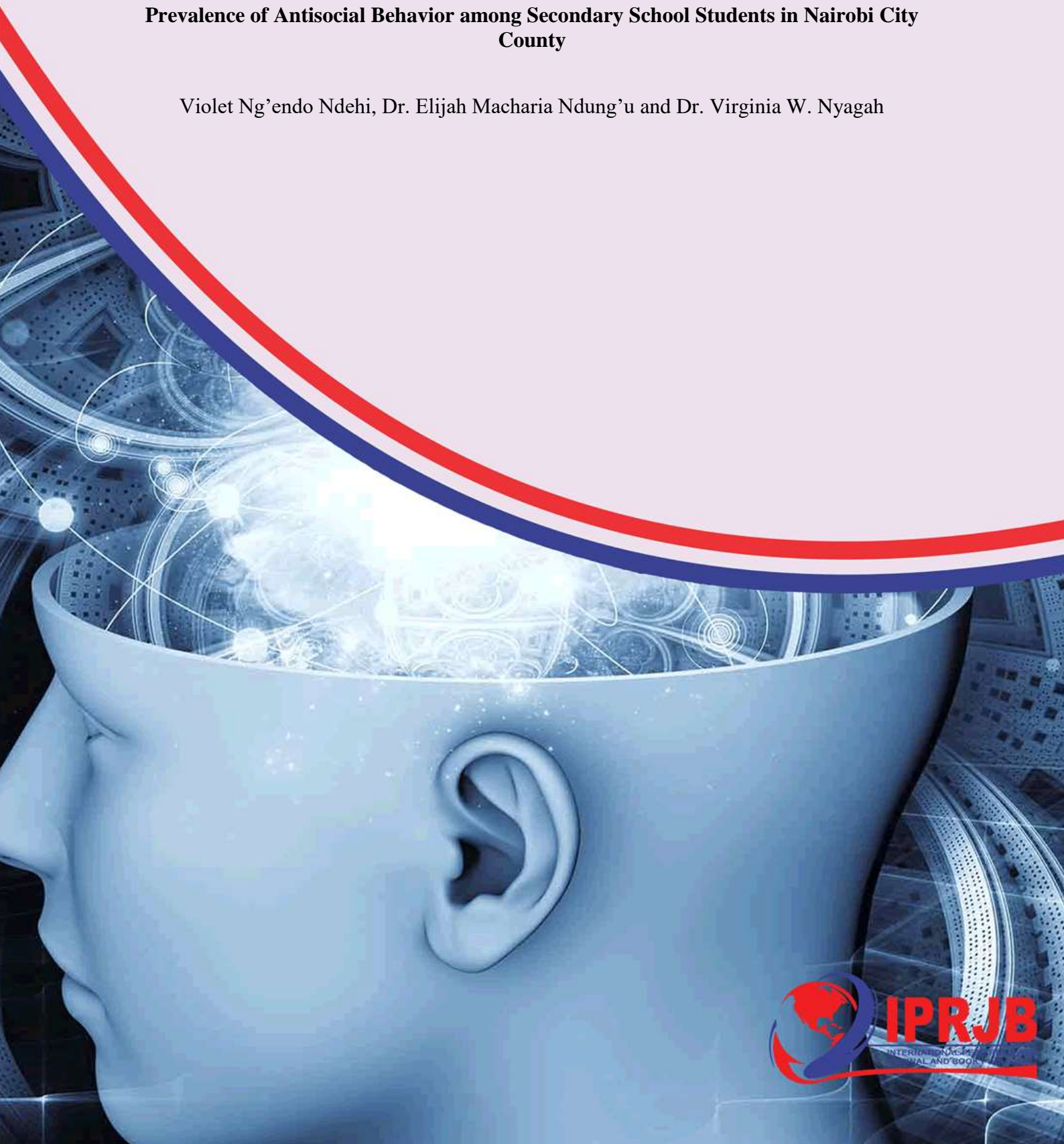



International Journal of Psychology (IJP)

**Prevalence of Antisocial Behavior among Secondary School Students in Nairobi City
County**

Violet Ng'endo Ndehi, Dr. Elijah Macharia Ndung'u and Dr. Virginia W. Nyagah



Prevalence of Antisocial Behavior among Secondary School Students in Nairobi City County

 ^{1*}Violet Ng'endo Ndehi
Catholic University of Eastern Africa
Corresponding Authors Email:
vnndehi@gmail.com

Dr. Elijah Macharia Ndung'u
Department of Counselling Psychology, Catholic
University of Eastern Africa

Dr. Virginia W. Nyagah
Department of Counselling Psychology, Catholic
University of Eastern Africa

Article History

Received 1st July 2023

Received in Revised Form 15th July 2023

Accepted 31st July 2023



How to cite in APA format:

Ndehi, V., Ndung'u, E., & Nyagah, V. (2023). Prevalence of Antisocial Behavior among Secondary School Students in Nairobi City County. *International Journal of Psychology*, 8(3), 1–11. <https://doi.org/10.47604/ijp.2056>

Abstract

Purpose: The aim of this study was to determine how common antisocial behavior is among secondary school students in Nairobi City County.

Methodology: The study employed a parallel convergent mixed-method design with a target population of 38,641 adolescents, parents, and teachers in Nairobi County secondary schools. Quantitative Data was collected from 398 adolescents in forms 2 and 3 via random sampling. All school categories were represented through cling cluster sampling, while simple random sampling selected respondents within each school. Qualitative data was purposively obtained from 10 students, 10 parents, and 10 teachers. Proven psychometric tools like Assessment of Identity Development in Adolescence, Strengths and Difficulties Questionnaire, Children's Perception of Inter-Parental Conflict Scale, and Dhaka Stress Scale-Adolescent collected quantitative data. Pearson coefficient correlations were calculated using Statistical Package for Social Sciences (SPSS version 25) to explore relationships between variables.

Findings: Based on this analysis, this study revealed the prevalence of moderate to severe antisocial behaviour in at least half of the adolescents in Nairobi. This is, however, not unique to the county. In attempting to explain the causes of antisocial behaviour among adolescents using the Problem Behaviour Theory by Jessor, et al. (2004), many scholars have witnessed it as a worldwide phenomenon.

Unique Contribution to Theory, Practice and Policy: The study recommended for the involvement of counselling professionals in the screening and treatment. The Ministry of Education must also undertake the task of harmonizing the school curriculum. By doing so, the curriculum can be developed into a well-balanced and comprehensive framework that promotes a healthier learning environment for students.

Keywords: *Antisocial Behaviour, Adolescents, Peer, Emotions*

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INTRODUCTION

Antisocial behaviours are rising among adolescents globally, which is not very comforting. At the same time, family breakdowns are rising, suggesting an increase in family stressors. Additionally, adolescents are prone to identity crisis which implies unresolved challenges in developing a strong sense of self. Therefore, a study shedding light on the relationship if any between family stressors, identity crisis and antisocial behaviour among adolescents was timely.

Antisocial behaviour by adolescents has been very well examined by multiple scholars from all over the world. Marzan, Callinan, Livingston & Jiang (2022), in Australia, found that individuals who consumed alcohol heavily or at high-risk levels were more likely to engage in antisocial behaviour. The study also discovered that a greater frequency of intense episodic drinking was associated with a higher self-reported engagement in antisocial behaviours. Furthermore, the study revealed that younger and unmarried respondents had a greater likelihood of exhibiting antisocial behaviour, even when considering the same amount of alcohol consumption (Marzan, et al., 2022).

In USA, according to Gustavsen, Nayga, and Wu (2015), children from divorced homes were 10% more likely to engage in heavy drinking and smoking of cigarettes and marijuana during their teenage years. The frequency of these risky behaviours increased with age for both males and females, regardless of the family structure. Divorce had a long-term impact on tobacco and marijuana use in both genders. Teenage girls from divorced households did, however, exhibit long-lasting consequences of divorce on the use of alcohol, including perhaps binge drinking, whereas teenage boys did not. (Gustavsen et al., 2015). A South African study by Nyirenda (2010) found out that the mother's death made teenage girls vulnerable to early sexual debut and HIV infection.

Animasahun found out that adolescent antisocial behaviour in Nigeria increased with divorce and single parenthood (Animasahun, 2014). Kumar, Huang, Othieno, Wamalwa, Madeghe, Osok, Kahonge, Nato & McKay (2018) studied pregnant and parenting teenagers in Kenya. The latter found out that the stress in new life adjustments increased with social stigma and poor emotional support (Kumar et al., 2018). Perhaps the most tragic antisocial behaviour is suicide. A study in Uganda by Kinyanda, Kizza, Levin, Ndyabangi, and Abbo (2011) showed increased suicidal behaviour among adolescents. The World Health Organization (WHO, 2019) reports suicide as the third largest cause of death among adolescents aged 15-19-year-old. As established by Wild, Flisher, and Lombard (2004), self-harm and suicide ideations are estimated to be more significant problems likely to occur between 50 and 100 times among juveniles.

Marzan, et al. (2022) conducted a study in Australia to investigate the volume and patterns of alcohol consumption and alcohol-related antisocial behaviours (ASB) in the general population and to determine if these associations are constant across different sociodemographic groupings. They made use of information from 30,275 respondents (14-69) from two waves of the National Drug Strategy Household Survey (2013 & 2016). Self-reported ASB perpetration was regarded as the dependent variable, with average daily alcohol consumption and the frequency of heavy episodic drinking (HED) being the primary independent variables.

According to the study, individuals who drank heavily or at high danger levels were more likely to engage in antisocial behaviour. Increased self-report of engaging in antisocial behaviour was also associated with an increasing frequency of intense episodic drinking. For a given amount

of drinking in their interaction models, the study discovered a higher probability of antisocial behaviour perpetration among younger and unmarried respondents. This study investigated whether there was a connection between antisocial behaviour and identity crisis resulting from family stressors, whereas the previous study sought to determine the dose-response relationship.

In an effort to determine whether or not Problem Behaviour Theory (PBT) can be applied universally to the study of teenage problem behaviour, Darvishi, Atef, Elhami, Trejos-Castillo & Habibi (2022) undertook a study in Iran. To assess vulnerability, availability of risky opportunities, perceived support, and antisocial behaviour, researchers analyzed data from a sample of 392 teenagers. The study revealed a significant association between individual vulnerability, availability of risky opportunities, and deviant behaviour, while perceived support moderated such behaviour. Perceived support had a negative relationship with criminal activity. The results of their research aligned with PBT's explanatory model for problem behaviour among teenagers in Western contexts. These findings enhanced the understanding of the prevalence of antisocial behaviour among Iranian youth and contributed to the development of effective interventions. The current research aimed to determine whether or not learners in Nairobi County's secondary schools were more likely to engage in antisocial behaviour after experiencing familial stress, an identity crisis, or both.

El-Shenawy (2014) did a study to see if Jessor's Problem Behaviour Theory could be used to explain problem behaviour in Egyptian adolescent populations. They collected data from 887 teenagers, with an average age of 13.4 years and a male ratio of 52 %. The study involved participants who evaluated three measures of problematic behaviour (delinquent behaviour, tobacco use, and problem drug use), three categories of psychosocial risk and three forms of psychosocial safeguarding (protection through role models, protection through controls, and protection through support). Female adolescents reported less involvement in problem behaviour than male adolescents. Teenagers' participation in problem behaviour varied significantly depending on psychosocial protective and risk factors. (El-Shenawy & Shehata, 2014). While El-Shenawy & Shehata (2014) looked into if problem behaviour could be used to explain problem behaviour in the Egyptian adolescent population, the current study used problem behaviour to see if there were connections between family stressors, identity crisis and antisocial behaviour in Nairobi County's secondary schools.

In order to evaluate the gender variations in the frequency and pattern of conduct disorders among secondary school pupils, Diwe (2016) conducted a study in Orlu Imo State of South-East Nigeria. In the Orlu Imo state, they employed a school-based descriptive cross-sectional survey of 402 pupils in chosen public and private secondary schools. According to the survey, 69.7% of the respondents have engaged in at least one form of antisocial behaviour, with men having a higher incidence of antisocial behaviour than women. The study found out that early intervention would reduce the chance of progression to some more serious criminal behaviour later in life and that identifying characteristics related to adolescent risky behaviour is essential for designing effective preventative methods. While the previous study examined the gender gap in the prevalence and pattern of conduct disorders among secondary school students, the current study determined that antisocial behaviour is connected to behaviours associated with identity crisis.

Munene (2022) conducted a research study in Kenya to assess the frequency of conduct disorder among adolescent offenders attending rehabilitation schools. The study found an

occurrence rate of 36.4%, with the highest prevalence among children from widowed families. The study also discovered significant links between parental religiosity, types of crime committed, parental marital status, and the occurrence of conduct disorder. While the above study sought the prevalence of conduct disorder among juvenile delinquents, the current study checked if there was a link between family stressors, identity crisis and antisocial behaviour in Nairobi County's secondary schools.

Statement of the Problem

Ideally, adolescents develop a mature identity that promotes positive behaviour through resolving conflicts in their social relationships (Erickson, 1963). Family support plays a crucial role in helping adolescents navigate adolescence and develop resilience. However, family stressors, such as parental conflict and family changes, can hinder this support.

The high incidence of antisocial behaviour among adolescents, encompassing aggression, academic difficulties, substance abuse, suicide, and vandalism, has led to widespread concern and public outcry. These behaviours may arise as a response to a lack of identity and a desire to adopt a delinquent role. Scholars have not focused on the causes of adolescent antisocial behaviour, particularly the impact of parental conflict and family changes. Stressors such as economic often leads to overworking parents, resulting in limited family time and guidance for adolescents. Current approaches to address adolescent antisocial behaviour, such as expulsion and imprisonment, do not effectively resolve underlying issues. Therefore, it is crucial to create healthier and more effective rehabilitation techniques.

The present study aimed to determine how common antisocial behavior is among secondary school students in Nairobi City County. The study's findings offer insightful analysis and suggestions for dealing with these problems.

Theoretical Framework

Problem Behaviour Theory (PBT)

Over the course of three decades, beginning in the early 1960s, Jessor and colleagues built this idea (Costa, 2021). This hypothesis explains how antisocial behavior originates and evolves (Jessor, 2005). According to proponents of this hypothesis, people act in response to the stimuli they receive from their surroundings. Personality, one's interpretation of one's surroundings, and one's actions make up these three spheres of influence. Each of these structures is composed of factors that either promote or rein in problematic actions.

Beliefs, drives, values, expectations, attitudes, orientations toward oneself, others, and the ability to exercise self-control are all part of the larger framework that makes up one's personality. These variables reflect the adolescent's social learning and developmental experience (Costa, 2021), the latter of which relates to this study by intersecting with the Identity Development variable conceptualised by Erikson's (1963) Psychosocial theory. The theory highlights that positive self-perception, higher acceptance of unacceptable conduct and reduced religious practice can catalyse problem behaviour within an individual's personality systems (White & Renk, 2012). These factors were considered pertinent to the current study.

Costa (2021) suggests that an adolescent's perceived environment system comprises elements such as social control, role models and parental support. These variables are distinguished by the proximity or remoteness to the problem behaviour. Proximate variables directly instigate a specific behaviour. For example, an adolescent may experience peer pressure to engage in heavy drinking. On the other hand, remote variables such as parental support do not instigate

or control specific problem behaviour. Instead, they determine the vulnerability of the adolescent to problem behaviour temptations which was key in this study.

Jessor, Turbin, and Costa reviewed the behaviour system theory in 2004. This system is a structure where one type of behaviour influences other types of behaviour. Thus, problem behaviours are positively interrelated among themselves and negatively related to prosocial behaviours. For example, problem drinking reduces inhibitions to dangerous driving and promiscuity (Costa, 2021). These behaviours are examples of some of the behaviours exhibited by adolescents with identity crisis.

PBT was highly applicable to this study. By defining Problem Behaviour as a socially unacceptable behaviour, the theory provided this study with a definition of anti-social behaviour -a key component of one this study's major variables. The three systematic causes of problem behaviour were to varying extents applicable to this study.

The personality system examines the influence of the adolescent's internal environment, such as personal belief, motivation, self-esteem and control on problem behaviour. It, therefore, seemingly points to the failure to build up a distinct sense of self through differentiation and identity development as defined by Bowen and Erikson, respectively, as an instigator of problem behaviour. Therefore, it enhanced the theoretical underpinning of this study's assessment of identity crisis and its relationship with anti-social behaviour.

The perceived environment system, on the other hand, investigates the influence of the adolescent's external environment on his or her antisocial behaviour. An essential component of this perceived environment is the presence and handling of family stressors whose relationship with identity crisis behaviour were examined by this study. Parental conflict, for example, draws an adolescent into the conflict through triangulation resulting in anxiety and lower self-esteem that then instigates problem behaviour.

Research Gaps

Although various studies have been conducted on common antisocial behavior is among secondary school students in Nairobi City County, these studies were limited to different countries and contexts. For instance; In an effort to determine whether or not Problem Behaviour Theory (PBT) can be applied universally to the study of teenage problem behaviour, Darvishi et al. (2022) undertook a study in Iran. The results of their research aligned with PBT's explanatory model for problem behaviour among teenagers in Western contexts. These findings enhanced the understanding of the prevalence of antisocial behaviour among Iranian youth and contributed to the development of effective interventions. The current research aimed to determine whether or not learners in Nairobi County's secondary schools were more likely to engage in antisocial behaviour after experiencing familial stress, an identity crisis, or both.

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Diwe, et al. (2016) conducted a study in Orlu Imo State of South-East Nigeria in order to evaluate the gender variations in the frequency and pattern of conduct disorders among

secondary school pupils,. While the previous study examined the gender gap in the prevalence and pattern of conduct disorders among secondary school students, the current study determined that antisocial behaviour is connected to behaviours associated with identity crisis.

METHODOLOGY

The study employed a parallel convergent mixed-method design with a target population of 38,641 adolescents, parents, and teachers in Nairobi County secondary schools. Quantitative Data was collected from 398 adolescents in forms 2 and 3 via random sampling. All school categories were represented through cling cluster sampling, while simple random sampling selected respondents within each school. Qualitative data was purposively obtained from 10 students, 10 parents, and 10 teachers. Proven psychometric tools like Assessment of identity Development in Adolescence, Strengths and Difficulties Questionnaire, Children's Perception of Inter-Parental Conflict Scale, and Dhaka Stress Scale-Adolescent collected quantitative data. Pearson coefficient correlations were calculated using Statistical Package for Social Sciences (SPSS version 25) to explore relationships between variables.

FINDINGS

The present study aimed to examine how common anti-social behaviour is among secondary school students in Nairobi County.

Table 1: Descriptive Analysis of Prevalence of Antisocial Behaviour

	N	Minimum	Maximum	Mean	Std. Deviation
Emotional Problem Score	397	0	10	4.71	2.743
Conduct Problem Score	397	0	9	3.48	1.917
Hyperactivity Score	397	0	10	3.78	2.128
Peer Problems Score	397	0	10	3.24	2.059
Prosocial Behaviour Score	397	0	10	7.51	2.062
Valid N (listwise)	397				

From the findings summarized in Table 1, majority of the respondents had prosocial behavior (mean=7.51; std.deviation=2.062) meaning that they engaged in behaviours which were intended to benefit others. The least behavior reported was the peer problems (mean=3.24; std. deviation=2.059).

The study used the Strength and Difficulties Questionnaire to measure antisocial behaviour. Responses were scored according to the tool's guidelines and totaled into five subscales: Emotional Problems, Conduct Problems, Hyperactivity, Peer Problems, and Prosocial Behaviours. Each subscale had its score cut-offs indicating acceptable (Normal), borderline, and unacceptable behaviour (Abnormal). Table 2 below summarizes the distribution of behaviour across these subscales.

Table 2: Assessment of Antisocial Behaviour Ranges per Subscale

	Abnormal	Borderline	Normal
Emotional Problems	28.5%	11.1%	60.5%
Conduct Problems	24.7%	26.2%	49.1%
Hyperactivity	12.3%	8.6%	79.1%
Peer Problems	15.6%	24.4%	59.9%
Prosocial Behaviours	7.8%	10.1%	82.1%

The information in Table 2 reveals that most respondents (60.5%) did not have serious emotional problems and were in the normal range. However, 28.5% of respondents did have serious emotional problems, with 11.1% falling into the borderline category. Regarding conduct problems, 49.1% of the respondents did not exhibit these behaviours, 26.2% were at the borderline, and 24.7% had severe conduct problems. Hyperactivity problems were rare, with only 12.3% of respondents exhibiting these behaviours. 8.6% were at the borderline, while the majority 79.1% did not have hyperactivity problems. Regarding peer problems, 15.6% of the respondents had severe problems, 24.4% were at the borderline, and 59.9% had no significant problems. Finally, majority of the respondents 82.1% exhibited prosocial behaviour, with only 10.1% falling into the borderline category and 7.8% underperforming. This shows the presence of moderate to severe antisocial behaviour in at least half of the adolescents in Nairobi. This is not unique to Nairobi County. It is worldwide as shown Jessor, et al (2004), Marzan, et al.,(2022), Darvishi, et al. (2022) and others.

The existence and nature of antisocial behaviour among adolescents was further explored using guided interviews. The responses were then coded and the codes were grouped into themes as shown in Table 3 below.

Table 3: Qualitative Data Analysis

Theme	1. Prevalence of Antisocial Behaviour			
	Coded	Students	Parents	Teachers
Manifested Negative Emotions	Isolation	✓	✓	✓
	Self-Centeredness	✓		✓
	Moodiness		✓	
	Negative social comparison			✓
	Laziness		✓	✓
Disconnectedness	Social media overuse		✓	
	Inattentive/Hyperactivity	✓		✓
Problem but not risky behaviour	Uncooperative/Rude/Aggressive	✓	✓	✓
	Truancy	✓		
	Bad Dressing		✓	
	Lying		✓	
	Coming home late from school		✓	
	Substance Abuse	✓	✓	
	Suicide / Self-harm	✓	✓	
Risky Behaviour	Theft		✓	
	Pornography/Prostitution		✓	

As seen in Table 3 above, the responses to the corresponding qualitative questions were categorized as behavioural or manifested psychological issues and then classified by severity.

For instance, problematic behaviour that may be resolved with regular discipline, guidance, and counselling was labelled as "Problem but not risky behaviour." In contrast, behaviour that is likely to cause harm to self or others was labelled as "Risky Behaviour."

Manifested negative emotions included isolation, self-centeredness, moodiness, negative social comparison, and laziness. Out of these, isolation was reported by all three groups of respondents, while self-centeredness was reported by students and teachers but not parents. Both parents and teachers reported laziness but not students.

Another theme was disconnectedness or the lack of engagement with others, often due to preoccupation with other things. Disconnectedness was manifested by inattentiveness or hyperactivity and excessive social media use. Students and teachers reported inattentiveness or hyperactivity, while excessive social media use was reported by parents only. Teacher code 01 mentioned, "Some students feel withdrawn and lack attention," while parent code 02 expressed, "Some students are overusing social media on their phones and other gadgets and watching horror movies with the wrong company" (Personal communication, November 3, 2022).

Problem but not risky behaviour included uncooperative, rude or aggressive behaviour, truancy, inappropriate dressing, lying, and coming home late from school. All three respondent groups reported uncooperative, rude, or aggressive behaviour, while parents uniquely reported bad dressing, lying, and coming home late from school. Students uniquely reported truancy. Substance abuse, suicide or self-harm, theft, and pornography or prostitution were all classified as risky behaviour. Out of these, substance abuse and suicide or self-harm were reported by both students and parents, while theft and pornography or prostitution were reported by parents alone.

Merger of Quantitative and Qualitative Data on the Prevalence of Antisocial Behaviour and Comparison of the Result with the Literature Reviewed

Behaviour that deviates from social norms is considered antisocial. (Jessor, 2005). The study sought the prevalence of antisocial behaviour among adolescents in Nairobi County, Kenya. The study's quantitative analysis found out that 28.5% of the respondents had severe emotional problems, while a smaller proportion, 11.1%, manifested borderline emotional problems. The corresponding proportions for hyperactivity were 12.3% and 8.6%, respectively, showing that hyperactivity was less prevalent than emotional problems. The qualitative analysis shed more light on emotional problems by providing examples such as isolation, self-centeredness, moodiness, negative social comparison, and laziness.

Furthermore, hyperactivity problems were related to social media overuse under the theme of disconnectedness; that is the lack of engagement with others, often due to preoccupation with other things. In addition, according to the quantitative data, 24.7% had severe conduct problems, while 26.2% of the respondents had borderline conduct problems. By distinguishing, with examples, between risky and non-risky behaviour, the qualitative analysis provided insights into the conduct problems. Examples of risky behaviours provided by the qualitative data include substance abuse, suicide, self-harm and theft.

Based on this analysis, this study revealed the prevalence of moderate to severe antisocial behaviour in at least half of the adolescents in Nairobi. This is, however, not unique to the county. In attempting to explain the causes of antisocial behaviour among adolescents using the Problem Behaviour Theory by Jessor, et al. (2004), many scholars have witnessed it as a worldwide phenomenon. While their studies were reviewed in depth in chapter 2, they are listed

here to show that antisocial behaviour is a global phenomenon. These studies include Marzan, et al., (2022) in Australia, Darvishi, et al. (2022) in Iran, El-Shenawy (2014) in Egypt, Diwe, et al. (2016) in Nigeria, and closer home, Munene, et al. (2022).

While the present study focused on the relationship between Family Stressors, identity crisis and Antisocial behaviour, it is worth remembering the reviewed literature by Jessor, Turbin, and Costa, 2004, who claimed that one type of behaviour influences other types of behaviour. Furthermore, this influence was empirically supported by Marzan et al, 2022, who found that individuals who drank alcohol heavily or at higher danger levels were more likely to be involved in other antisocial behaviour. Therefore, relying on Jessor, Turbin, and Costa, 2004 and Marzan et al, 2022, it is reasonable to expect that the prevalence of antisocial behaviour measured by the present study includes behaviours that mutually influence each other.

SUMMARY, CONCLUSION AND RECOMMENDATIONS

Summary

The findings of the study indicated that the respondents had severe emotional problems, while a smaller proportion had manifested borderline emotional problems. The corresponding proportions for hyperactivity was less prevalent than emotional problems. The qualitative analysis shed more light on emotional problems by providing examples such as isolation, self-centeredness, moodiness, negative social comparison and laziness. Furthermore, hyperactivity problems were related to social media overuse under the theme of disconnectedness. That is the lack of engagement with others, often due to preoccupation with other things.

In addition, based on the quantitative data, the respondents had severe conduct problems and moderate borderline conduct problems. By distinguishing, with examples, between risky and non-risky behaviour, the qualitative analysis provided insights into the conduct problems. Examples of risky behaviours provided by the qualitative data include substance abuse, suicide, self-harm and theft. In general, this study found the prevalence of moderate to severe antisocial behaviour in at least half of the adolescents in Nairobi County. This is, however, not unique to the county.

Conclusion

Based on this analysis, this study revealed the prevalence of moderate to severe antisocial behaviour in at least half of the adolescents in Nairobi. Some of the antisocial behaviour included isolation, self-centeredness, moodiness, negative social comparison, and laziness. Another theme was disconnectedness or the lack of engagement with others, often due to preoccupation with other things.

Recommendations

Counselling professionals should consider the screening and treatment of Identity Crisis in adolescent children of conflicting parents engaged in marriage counselling. The screening may be done using the tools reviewed and used in this study, the Children's Perception of Inter-Parental Conflict Scale (CPIC) and Assessment of Identity Development in Adolescence (AIDA). This would help avert antisocial behaviour as a result of the identity crisis.

To alleviate the significant academic pressure imposed by parents on students, the Ministry of Education must undertake the task of harmonizing the school curriculum. By doing so, the curriculum can be developed into a well-balanced and comprehensive framework that promotes a healthier learning environment for students.

These interventions should be implemented not only within schools but also within communities. Therefore, parents, teachers, Non-governmental Organizations, churches, the government and stakeholders in psychological counselling must collaborate and implement interventions. This can create a more robust and holistic support system by adopting a comprehensive approach encompassing educational institutions and community settings. This approach will enable the country to address the underlying causes of antisocial behaviour and provide necessary resources and guidance to families experiencing stressors, ultimately fostering a healthier and more harmonious society.

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