# ALCOHOL USE, ANXIETY AND DEMOGRAPHIC PREDICTORS OF AGGRESSIVE BEHAVIOUR AMONG ADOLESCENTS IN IBADAN AND UYO METROPOLISES: A CROSS-CULTURAL STUDY

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Abstract: This study investigated alcohol use, anxiety and demographics as predictors of aggressive behaviour among adolescents in Ibadan and Uvo metropolises. It was a cross-cultural survey utilizing an ex-post facto design. A total of 447 purposively sampled adolescents from Yoruba and Ibibio cultures participated in the study. Revalidated Alcohol Use Identification Test by Babor, Higgins-Biddle, Saunders & Monteiro (1993) State-Trait Anxiety Inventory by Spielberger (1983), and Aggressive Scale by Orpinas & Frankowsk (2001) were used to collect data. The Pearson-r results {r=.19, df = 445, p<.05} showed that alcohol use positively correlated with aggression, the results {t (445) = 4.89, p<.05} and { $R^2$  = .32, F (6, 441) = 7.26, p < .05} indicated that anxiety and demographic factors respectively predicted aggressive behaviour among the participants. Gender, family type, perceived parenting style, family size, and parental marital status independently predicted aggressive behaviour among the participants. Moreso, the 4 {t (445) = 1.46, p>.05} indicated that adolescents who were of the Yoruba culture were not significantly different in aggressive behaviour from those who were of the Ibibio culture. Age was not an independent predictor. It was suggested that adolescents, parents, guardians, and teachers should be mindful of these factors while psychologists and other behaviour scientists develop valid intervention programmes to curb the aggression among adolescents.

Keywords: Aggression, Alcohol Use, Anxiety, Demographic Factors, Culture

# **INTRODUCTION**

Aggressive behaviours among adolescents have been on the increase and have raised concern globally as they constitute threats to the security, life, property and the socioeconomic development of the country. The adolescents are known to be energetic and their aggressions often include verbal aggression and physical aggression such as

bullying, fighting, robbery, homicide, insurgency, etc. Like any other behaviour, a number of psychological factors have been implicated in the etiology of aggressive behaviours. For instance, a strong association between alcohol use and aggression has been established for centuries (Hanson, 1995). Presently, alcohol is known as the psychotropic substance most frequently related to aggressive and violent behaviour. It is well known that there is an association between alcohol consumption and physical aggression. This happens in part because alcohol can produce aggression, but also in part because many violent people drink a lot (Boles & Miotto, 2003; Gmel & Rehm, 2003; Parker & Rebhun, 1995; Pernanen, 1991; Fagan, 1990; Zhang, Wieczorek, & Welte, 1997). Using the anxiolysis-disinhibition model, it has been explained that alcohol leads to aggression because it reduces anxiety (Sayette, 1999). The alcohol-aggression relationship has been demonstrated in adult men and women (Giancola, 2002; Hoaken & Pihl, 2000), all showing that alcohol has a tendency to lead to aggressiveness in both men and women.

The notion that alcohol intoxication impairs behavioural inhibition, and, by extension, facilitates aggressive behaviour, is well engrained in both the scientific literature and popular culture. Impaired inhibitory control, also referred to as disinhibition, can be described as a lack of cognitive and/or behavioural restraint that can result in a number of maladaptive behaviours. In the laboratory, alcohol has been shown to impair performance on a vast number of cognitive and behavioural tasks that measure inhibitory control (Fillmore, 2003; Lyvers, 2000). Alcohol consumption has been implicated in aggressive behaviour, as evidenced by both correlational and experimental studies (Bushman & Cooper, 1990; Chermack & Giancola, 1997). Research has shown that alcohol is involved in about50% of violent crimes (Murdoch, Phil & Ross, 1990; Pernanen, 1991). It has also been noted that it is the acute effects of alcohol, rather than its chronic effects, that has the largest impact on aggressive behavior (Chermack & Blow, 2002; Fals-Stewart, 2003).

Also, some studies have shown links between anxiety and aggressive behaviour/tendency. In the Diagnostic and Statistical Manual for Mental Disorders (DSM)-V anxiety is defined as an apprehensive anticipation of future danger or misfortune accompanied by a feeling of dysphoria or somatic symptoms of tension (American Psychiatric Association, 2013). Some longitudinal studies suggested that children with emotional disorders in the absence of conduct disorders are less likely to develop later delinquency than the general population (Graham & Rutter; 1973; Kohlberg, Ricks, & Snarey, 1984; Mitchell & Rosa, 1981). There are a number of possible explanations for the influence of anxiety on the course and later manifestation of aggression in children and adolescents. For instance, Walker,

Lahey, Russo, Frick, Christ, McBurnett, Loeber, Stouthamer- Loeber & Green (1991) contended that the effect of anxiety on aggression can be understood in terms of Gray's two-factor model of antisocial behavior. Gray (1987) proposed that normal and abnormal variations in personality are a product of the relative balance of two separate neurological systems of behavioral activation and inhibition. According to Gray, enduring aggressive behavior is a function of excessive appetitive driving by the behavioural activation system (BAS) and insufficient inhibition of antisocial behaviour by the behavioural inhibition system (BIS). Yet more comprehensive study of the link between the course of aggression and anxiety is in order given the relative dearth of studies in this area, as well some evidence that appears to conflict with the findings of studies cited above (Graham & Rutter, 1973; Kohlberg, et. al., 1984; Mitchell & Rosa, 1981). Studies suggested that anxiety and aggression may be positively related, as significantly more anxiety was found in both their high-verbal and high-physical aggression subjects (Kashani, Deuser & Reid, 1991; Ialongo, Edelsohn, Werthamer-Larsson, Crockett & Kellam, 1994).

Furthermore, empirical evidences have implicated some demographic factors in aggression. Typically, it has been reported that the tendency for males to be more aggressive than females is larger among adolescents in both psychological (Hyde, 1984) and ethnographic (Rohner, 1976) research. Still, research has suggested that males use more physical aggression than females while females use more verbal aggression than males, with these differences starting from about the age of two years (Busari, 2009). Laboratory studies often show the same type of sex effect, but provocation dramatically reduces sex differences in physical aggression, and specific types of provocation differentially affect male and female aggression (Bettencourt & Miller 1996). The preferred types of aggression also differ for males and females.

Males prefer direct aggression, whereas females prefer indirect aggression (Oesterman, Bjoerkqvist, Lagerspetz, Kaukiainen & Landau, 1998). Developmental research suggests that many of these differences result from different socialization experiences (White, 2001). Gender differences were also found in the most violent behaviours of homicide and aggravated assault; the ratio of male to female murderers in the United States is about 10:1 (FBI 1951-1999). Males were reportedly more upset by sexual infidelity of their mates than by emotional infidelity, whereas the opposite pattern occurs for females (Geary, Rumsey, Bow-Thomas & Hoard, 1995). Onukwufor (2013) also found a significant different between male and female students in physical aggressive. Fasteau (1974) pointed to the prevalence of aggressiveness among male heroes in literature and in the popular culture. In a survey, Oberst, Charles & Chamarro (2015) found significant differences between

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boys and girls in severity of aggression. However, Obikeze, Ikwumelu & Eluu (2014) found both males and females to be equally aggressive in their relations with each other.

Studies have reported a huge variation in age of adolescents and their aggressive tendencies from one society to another, with age not being determined by the society (Okpako, 2009) but by biological compositions (Ezeh, 2005). Each noted that the biological changes are the driving force behind all adolescents' behavior. Wu, Lee & Lee (1998) found from their studies that increased in age of participants attracted increase in the rate of delinquency and aggressive behavior. They infer that as the adolescent grow older, he/she has more courage to fry out new things, more criminal things and rebellious nature also increase. In a recent study, Obiumu (2014) found that age and parenting style had significant effect on aggressive behaviour among adolescent, Amadi, Ahamefule & Tunde (2015) found a joint influence of personality and demographic factors on aggressive behaviours among secondary school adolescents while Ojewola (2014) found that family condition, gender and age influenced aggressive behaviour among adolescents on South West Nigeria.

Results of studies discussed above clearly implicate alcohol use, anxiety, and some demographic factors in aggressive behaviour, but with varying results. Generally, the nature and pattern of aggression among the Nigerian adolescents have changed with time, becoming more dramatic; alcohol is freely taken at any age, and the frequency of aggression and anxiety has reached unprecedented heights, undermining every facet of social life, with resultant moral decadence, violence, thuggery, assault, madness, and murder (Fareo, 2012). These make it necessary to investigate the relationship between alcohol use, anxiety, demographic variables and aggression as a comparative study between youths of two cultural backgrounds in Nigerian.

# THEORETICAL FRAMEWORK

Bandura's (1977) social learning theory provided the main theoretical framework and basis for this study. According to Bandura (1977) human begins, by their nature are biologically, psychologically, and socially prone to aggressive impulses to which they respond. The willingness or not to respond is majorly a function of past social learning. Bandura argued that social imitation rather than Skinner's model of reinforcement was responsible for aggressive behaviour, implying that aggression is imitated rather than learned through conditioning. The social learning theory of Bandura emphasizes the importance of observing and modeling the behaviour, attitudes, and emotional reactions of others. Bandura (1977) opined that learning would be exceedingly laborious, not to mention hazardous, if people had to rely solely on the effect of their own actions to inform them what to do. Most human behaviours are learned observationally; through observing others (models) one forms an idea of how new behaviours are performed, so, on a sooner or later occasions this coded information and retrieved and used. Social learning theory explains human behavior in terms of continuous reciprocal interaction between cognitive behavioural and environmental influences. Research, such as Bobo Doll Study, have shown that aggression can be learnt through imitation (Bandura 1999).

By this theory, it could be explained that aggressive tendencies in an adolescent is a function of learning – by observing a model which could be a parent, a sibling, a teacher, clergy, etc. Simply, the adolescent consciously and unconsciously observes where, when, and how the model expresses aggression and possibly, achieves a desired goal. When such or similar occasion, the adolescent (learner) simple reproduces the learnt behaviour (aggression) with the understanding that that is the right behaviour (action or reaction) and with the intention of achieving the desired goal.

# STATEMENT OF THE PROBLEM

Aggressive behaviours among the Nigeria young people, beginning from adolescence is alarming manifesting in general restiveness and now insurgency. Political and military efforts to curb do not seem to yield the expected results. Research on adolescent aggression, alcohol use and anxiety has increased understanding of the problem, prevention, and intervention efforts have achieved only moderate success. Perhaps, what is needed is some fresh insight into the problem and a new vision for how alcohol intake and anxiety can lead to aggression among adolescents. Although alcohol use and anxiety have been studied at length in relation to aggression, little research has focused on direct relationship as it pertains to adolescents in Nigeria. The contributions of demographic factors to aggressive behaviours generally have vielded contradicting results. For instance, Hyde, (1984) and Onukwufor (2013) found that males are more aggressive while Feshbach (1969) found the opposite. These necessitate further investigations, hence, this study. Generally, given the potentially serious consequences of adolescents' aggression (Parker & Asher, 1987), and its persistence over time and situations, it becomes important to research further to empirically ascertain the psychological etiology of aggressive behaviour, especially among the adolescents with aim of fostering scientific explanations and solutions.

Also, most of the research in this area appear date more than a decade ago and are foreign to Nigeria.

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It was hypothesized that:

- 1. There will be a significant positive relationship between alcohol use and aggressive behaviour among adolescents in Ibadan and Uyo metropolises.
- 2. Adolescents in Ibadan and Uyo metropolises with high anxiety levels will report higher aggressive behaviour than those with low anxiety level.
- 3. Demographic factors (gender, age, family type, perceived parenting style, family size, and parental marital status) will independently and jointly predict aggressive behaviour among adolescents in Ibadan and Uyo metropolises.
- 4. Adolescents from the Yoruba culture will report higher aggressive behaviour than those from the Ibibio culture.

# METHOD

### **Research Design**

The study was a cross-cultural survey adopting ex-post facto design. This was because variables in the study were not manipulated.

### Setting

The study was conducted in selected public secondary schools in Ibadan North Local Government Area in Oyo State and Uyo Local Government Area of Akwa Ibom State. Ibadan is in the South West Nigeria, lying 7, 3878 (723'16.008"N) latitude and 3, 8964 (353'47.004"E) longitude; the altitude of Ibadan is 248 metres with a population of 1,338,659 people (National Population Commission, 2006). It is the Capital of Oyo State. Uyo is the Capital of Akwa Ibom State; Uyo is situated at 5.03° North latitude, 7.93° East longitude and 196 meters elevation above the sea level; it has a population of Uyo is 309,573 (National Population Commission, 2006).

# SAMPLING TECHNIQUE

A multi-stage sampling technique was adopted for the study. Convenience sampling technique was used to select the local government areas – Ibadan North and Uyo; this made for easy accessibility; stratified sampling method was used to classified into public and private school, randomization was used to select the schools within each stratum and the purposive sampling method was used to select the actual participants for the study – only those who were of the Yoruba tribe in Ibadan (Oyo State), only those who were of the Ibibio tribe in Uyo (Akwa Ibom), and only those whose ages ranged between 10 and 15 years participated in the study.

# **Participants**

A total of 447 adolescents participated in the study; they were 246 from 5 schools in Ibadan North Local Government Areas (Oyo State) and 201 from 5 schools in Uyo Local Government Area (Akwa Ibom State). Their ages ranged between 10 and 15 years with a mean age of 13.2 years. Of this number, 203 (45.42%) were males while 244 (54.59%) were females, 230 (51.45%) were from monogamous families while 217 (48.55%) were from polygynous families, 199 (44.52%) reported democratic parenting style while 248 (55.48%) reported authoritarian parenting style, 201 (44.97%) belonged to small family sizes while 246 (55.03%) belonged to large family sizes.

# Instruments

The instruments used for this study was a standardized, structured self-report questionnaire with four sections:

*Section A: Demographic Variables:* Contained demographic factors which included gender, age, family type, perceived parenting style, family size, and parental marital status.

# Section B: Alcohol Use Identification Test (AUDIT) by Babor, Higgins-Biddle, Saunders & Monteiro (1993)

This scale was used to measures alcohol use among the participants. it was developed by Babor, Higgins-Biddle, Saunders & Monteiro (1993); it measures the pattern and level of drinking indicating daily drinking, weekly drinking, monthly drinking, and total abstinence. the first three questions in this section are responsible for eliciting the levels/pattern of drinking (daily drinking = keyword 2: weekly drinking = keyword 3 and 4; monthly drinking = keyword 5, 6 and 7 and abstinence = keyword 1 and 8) the last three question in section A measure lifetime use, which involves 3 measures of pattern of drinking (daily drinking, weekly drinking and month drinking). The reliability of the scale was estimated to be .70 Cronbach alpha. For the purpose of this study, the scale was revalidated among Nigerian sample using 38 adolescents from a secondary in Ibadan and 35 from Uyo and a Cronbach's coefficient of .90 was obtained.

# Section C: State-Trait Anxiety Inventory (STAI) by Spielberger (1983)

This was used to measure anxiety levels of participants (adolescents). STAI has 2 sub-scales – Y-1 (State) and Y-2 (Trait) each having 20 items. The Y-1 measures anxiety level as at the time (how the respondent feel at the moment) while Y-2 measures anxiety level generally (how the respondent feel generally). Spielberger

(1983) who provided the original psychometric properties for American samples; it was adopted for Nigerian use by Omoluabi (1997) who provided the psychometric properties for the Nigerian samples; a norm score of 33.59 was obtained and the reliability coefficient for State Anxiety Inventory (STAI Y-1) obtained in a test-retest analysis is .61 and its validity coefficient is .69. For the purpose of this study, the scale was revalidated among Nigerian sample using 38 adolescents from a secondary in Ibadan and 35 from Uyo; 18 items (for State) and 17 items (for Trait) were found reliable with Cronbach's coefficient of .68 and .78 respectively, and general Cronbach's coefficient of .74. A new general norm of .74.5 was established at 2 standard deviations above mean; scores from the norm and below showed low anxiety while scores above the norm showed high anxiety.

# Section D: Revalidated Aggressive Scale by Orpinas & Frankowski, (2001)

This scale was developed by Orpinas & Frankowski (2001). It is composed of 11items Likert-type scale with the response format ranging from "0 times" to "6 or more times." Thus, the Scale has a minimum score point of 0 and a maximum of 66. Each point represents one aggressive behaviour adolescents engaged (any where) during the week prior to the survey. Most questions refer to aggressive behaviors against other adolescents, including overt aggressive behaviors such as verbal aggression (teasing, name-calling, threatening to hurt or hit) and physical aggression (pushing, slapping, kicking, hitting). For the internal consistency, the authors reported Cronbach's alpha coefficients of .88 for African American street children and .89 for Caucasian street children; it also reported a split-half reliability of .88. For the purpose of this study, the scale was revalidated among Nigerian sample using 38 adolescents in a secondary in Ibadan and 35 in Uyo. A total of 10 items were found reliable with Cronbach's co-efficient of .72. A new norm of 47 was established at 1 standard deviation above the mean. Scores below the norm indicated low aggressive behaviour while scores from the norm and above indicated high aggressive behaviour.

### Procedure

A letter of introduction was obtained from the Departments of Psychology in University of Ibadan and University of Uyo. On the strength of the letter, the principal of each selected school was approached, the purpose and nature of the study was explained to him/her, and permission to access the student was obtained. A pilot study was first conducted to make the instruments valid, reliable, culturesensitive, and population-specific. The revalidated instruments were then administered personally to students in other selected schools in each state. The students were met in their classes, only those who were of the Yoruba tribe and Ibibio tribes, who were not above 15 years, and who volunteered participated in the study. Those from other tribes/races (including the Anang and Oron) were not accommodated in the study. The teachers assisted in each school to ensure orderliness among the students. All necessary and required explanations were given to the participants as they responded to the items on the instrument. A total of 250 questionnaires were issued for Oyo State and 220 for Akwa Ibom State; 246 and 201 respectively were properly filled, retrieved, and used for the analysis using SPSS Version 20.0. A total of 17 questionnaire were discarded for not being properly filled while 6 mal-handled.

### **Statistics**

Pearson Product Moment Correlation was used to analyze for hypothesis 1, t-test for independent samples was used to analyze for hypotheses 2 and 4 while multiple regression analysis was used to analyze for hypothesis 3.

# RESULTS

**Hypothesis One** stated that there will be a significant positive relationship between alcohol use and aggressive behaviour among adolescents in Ibadan and Uyo metropolises. This hypothesis was tested using Pearson Product Moment Correlation and summary of results is presented on Table 1. Pearson Product Moment correlation

Table 1: Pearson Product Moment Correlation showing the Relationsl	nip between
Alcohol use and Aggressive Behaviour	

	Variables	Ν	Mean	Std	r-cal	Р	Remark	
	High alcohol use	245	25.16	10.34				
Aggression	Low alcohol use	202	20.76	09.40	.19	<.05	Sig.	
	LOW ALCOHOL USE							

The result on Table 1 shows that there was significant positive relationship between alcohol use and aggression {r=.19, df = 445, p<.05}. This suggests that increase in alcohol use significantly related to increase in aggressive behaviour among students (adolescents).

**Hypothesis Two** stated that adolescents in Ibadan and Uyo metropolises with high anxiety level will report higher aggressive behaviour than those with low anxiety level. This hypothesis was tested using t-test for independent sample and summary of results is presented on Table 2.

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High Anxiety Level and those with Low Anxiety Level on Aggressive Behaviour							
	Anxiety	Ν	Mean	Std	df	Т	р
	High	198	23.92	19.67			
Aggression					445	4.89	<0.05
	Low	249	18.22	17.87			

Table 2: T-Test Summary Table showing the Difference between Adolescents withHigh Anxiety Level and those with Low Anxiety Level on Aggressive Behaviour

The result presented on Table 2 {t (445) = 4.89, p<.05} shows that adolescents with high anxiety level were significantly different in aggressive behaviour from those with low anxiety level. Those with high anxiety level reported higher aggressive behaviour (M=23.92, S.D=19.67) than those who did use alcohol (M=18.22, S.D=17.87), with a mean difference of 5.7. The hypothesis is thus accepted.

**Hypothesis Three** stated that demographic variables (gender, age, family type, perceived parenting style, family size, and parental marital status) will independently and jointly predict aggressive behaviour among adolescents in Ibadan and Uyo metropolises. This hypothesis was tested using multiple regression analysis; summary of the result is presented on Table 3.

Table 3: Summary of Multiple Regression Analysis showing the Influence of Demographic Factors (Gender, Age, Family Type, Perceived Parenting style, Family Size, and Parental Marital Status) on Aggressive Behaviour

Predictors	В	Т	Р	R	<b>R</b> <sup>e</sup>	F	Р
Gender	<b></b> 33	-2.12	<b>&lt;.</b> 05				
Age	.15	-0.53	>.05				
Family type	.23	3.82	<b>&lt;.</b> 05	0.33	0.32	7.76	<b>&lt;.</b> 05
Perceived parenting style	.18	-3.06	<b>&lt;.</b> 05				
Family size	.34	4.01	<b>&lt;.</b> 05				
Parental marital status	28	2.56	<.05				

The results on Table 3 show that the demographic variables (gender, age, family type, perceived parenting style, family size, and parental marital status jointly predicted aggressive among the adolescents studied { $\mathbf{R}^2 = .32$ , F (6, 441) = 7.26, p < .05}, accounting for 32% of the variation observed in the students' aggressive

behaviour. Thus, the finding implies that the collective presence of the gender, age, family type, perceived parenting style, family size, and parental marital status significantly predicted aggressive behaviour among students studied. The results further reveal that gender ( $\beta = -.33$ , t=-2.12, p<.05), family type ( $\beta = .23$ , t=3.82, p<.05), perceived parenting style ( $\beta = .18$ , t=-3.06, p<.05), family size ( $\beta = .34$ , t=4.01, p<.05), and parental marital status ( $\beta = .28$ , t=-1.56, p>.05) were significant independent predictors of aggressive behaviour among the adolescents studied. While age ( $\beta = .15$ , t=-0.53, p>.05) was not independent predictors of aggressive behaviour among the gender adolescents. These results imply that being male, being from a polygamous, being reared under authoritarian parenting style, being from a large family size (having 5 children and above), and being reared where one of the biological parents had separated, divorced, or deceased increased the chances for aggressive behaviour among the adolescents for aggressive behaviour among the adolescents for a adolescents. The adolescents studies. Whereas being in early or late adolescence. The hypothesis is therefore supported.

**Hypothesis Four** stated that adolescents from the Yoruba culture will report higher aggressive behaviour than those from the Ibibio culture. This hypothesis was tested using t-test for independent samples and summary of the results is presented on Table 4.

between Toruba and Ibibio adorescents							
	Culture	Ν	Mean	Std	df	t	р
	Yoruba	246	23.96	11.67			
Aggression					445	1.46	>0.05
	Ibibio	201	22.76	10.49			

Table 4: t-test summary table showing the differences in aggressive behaviour between Yoruba and Ibibio adolescents

The result presented on Table 4{t (445) = 1.46, p>.05} shows that adolescents who were of the Yourba culture were not significantly different in aggressive behaviour from those who were of the Ibibio culture. Those who were of the Yoruba culture reported a mean score of 23.96 on the aggressive behaviour scale while those from the Ibibio culture had a mean score of 22.76 with a negligible mean difference of 1.2. Thus the hypothesis was rejected.

# DISCUSSION OF FINDINGS/CONCLUSION

Firstly, the result of this study showed that adolescents who use alcohol reported higher aggressive behaviour than those who did not use. This finding is line with earlier findings, all of which found that alcohol potentially caused and/or increased aggressiveness (Hoaken & Pihl, 2000; Giancola, et al., 2002; Hanson, 1995). This

may be attributed to the fact that, alcohol, like any other psychoactive substance, alters the brain and the entire central nervous system; with this it affects parts of the brain that inhibits certain excessive (aggressive) behaviours, including the tongue which explains why, with the intake of alcohol, the individual could be both physically and verbally aggressive. An earlier study using the anxiolysis-disinhibition model, found that alcohol leads to aggression because it reduces anxiety (Sayette, 1993). This consistent finding could be due to the fact violent, aggressive people drink a lot (Boles & Miotto, 2003; Gmel & Rehm, 2003). Most of the earlier studies were conducted with adults but a similar result has now been found with adolescents, showing the consistent relationship between alcohol and aggressiveness.

Also, the finding that adolescents with high anxiety levels reported higher aggressive behaviour confirmed some earlier findings such as those which found significantly more anxiety in both their high-verbal and high-physical aggression subjects (Ialongo, Edelsohn, Werthamer-Larsson, Crockett & Kellam, 1994; Kashani, Deuser & Reid, 1991), and Gray's (1987) model, such people have insufficient inhibition of antisocial behaviour by the behavioural inhibition system (BIS). This could be due to the fact that under high anxiety, the individual becomes agitating, impulsive, impatient, and may lose control in what is said and done. Anxiety is a state of confusion during which any socially mal-adaptive behvaiour is possible; the individual is generally confused. The DSM-V criteria for anxiety include palpitation, short-breathing, difficulty verbalizing, etc; naturally, an individual under this condition prone acting aggressively (American Psychiatric Association, 2013).

The study further found that gender differences in aggressive behaviour with the males reporting higher aggressive behaviour than the females. This finding is line with (Fasteau, 1974) who pointed to the prevalence of aggressiveness among male heroes in literature and the popular culture and Smith's (1984) findings that showed repeatedly that men have more favorable attitudes than women toward aggressive. It also confirmed the position that males were more aggressive than females among adolescents in both psychological (Hyde, 1984) and ethnographic (Rohner, 1976) research. It also confirmed Fasteau's (1974) who observation pointing to the prevalence of aggressiveness among male heroes in literature and in the popular culture. The result contradicts the findings of Obikeze, Ikwumelu, & Eluu (2014) who observed that males and females were equally aggressive in their relationships with each other. These differences could be attributed to a number of factors including socialization as noted by White (2001). In most of the human cultures, the males are socialized to bold, outgoing, fearless, adventurous, etc, and in the process, aggressiveness is consciously or unconsciously instilled in them. On the other hand,

the females are socialized to be calm, quiet, etc; so they grow up not to be aggressive. These, however, does not totally rule out the contributions of genetic materials such male/female hormones. So, in practice, it is the interaction of the genes and culture that makes the differences.

That family type was found as an independent predictor of aggressive behaviour among the participants (adolescents), with those from polygynous (polygamous) families reporting higher aggressive behaviour could be due to the fact that a typical polygamous home is characterized by competitions and survival-of-the-fittest experiences; aggression may therefore be a survival mechanism which may unconsciously become a personality trait exhibited within and outside the family setting, some time even when it is not very necessary.

More over, this study found that parenting style was an independent predictor of aggressive behaviour among adolescents studied, with adolescents reared by authoritarian parents reporting higher aggressive behaviuor than those reared by democratic parents. This supported the finding of Obiunu (2014) which held that there was a significant relationship between parenting style and aggressive behaviuor among adolescents. A possible explanation for this could be that those reared by the authoritarians are used to harsh ways and words and likely to exhibit same wherever they are.

Family size was also found to be an independent predictor of aggressive behaviour among the adolescents studied; those from the large family sizes were reported higher aggressive behaviour than those from small family size. This could be attributed to the fact that in large family there is bound to be competition for resources and every competition is likely to lead to aggression if the individual must achieve the desired goal among numerous competitors. And for participants from homes where biological parents has separated, divorced, or deceased to reported higher aggressiveness that those from home where both parents are still alive and living together, is indicative of the fact that in such separated homes, it is likely that the parent with whom the adolescent is staying must have taken to another spouse, poverty, ill-care, inadequate attention, etc are likely to characterize the adolescent's experiences. With these, the tendency is for the individual to develop social vices including aggression and restiveness.

The finding that age was not an independent predictor of aggressive behaviour among the participants studied contradicted the findings of Obiunu (2014) and Wu, et. al. (1998) who found significant relationships between age and aggressive

behaviour and delinquency. This could be attributed to the fact that the age differences between the participants in the earlier studies were great. In this study, the all the participants fell with the age bracket of 10 to 15 years. This indicates that those with the age bracket of 10 to 15 years were not significantly different in aggressiveness, notwithstanding their sex, and other possible influencing factors.

Conclusively, alcohol use, anxiety, and demographic variables were studies as predictors of aggressive behaviour among adolescents in Ibadan and Uvo metropolises. The results showed that alcohol use positively correlated with aggressive behaviour, anxiety, gender, family type, parenting style, family size, and parental marital status predicted aggressive behaviour while age did not. These have implication on the society at large; there is need to control for the variables that are found to correlate or predict aggressive behaviour among adolescents, especially with the understanding that they constitute the future leaders and workforce of the society. It also has implication for parenting and guidance; parents, guardians, and teachers need to safeguard against such variables in order to succeed in the task of parenting and ensure peaceful home and societies. Ultimately, there is a great implication for psychological services; psychologists and other behaviour scientists need to develop valid intervention programmes to curb aggressiveness among adolescents to forestall its attendant ills on the individuals, families, and the society. However, subsequent studies may have to extend to other tribes and accommodate other possible variables.

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