

## Predicting risky behaviors in adolescents based on anxiety sensitivity and interpersonal trust with the mediation of self-acceptance

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**Introduction:** It is important to identify the causes of risky behaviors in adolescents, which may occur for different reasons. The research aimed to predict risky behaviors in adolescents based on anxiety sensitivity and interpersonal trust with the mediation of self-acceptance.

**Research Method:** The present study was descriptive and correlational. The statistical population of the study included all adolescents aged 14 to 18 years in Tehran in the academic year of 2017-2018, from which 500 people were selected by convenience sampling from schools. The study tools included the Risky Behaviors Questionnaire by Mohammadkhani; Unconditional Self-Acceptance Questionnaire by Chamberlain & Haaga, Anxiety Sensitivity Index by Reiss et al., and Mental Toughness Questionnaire by Clough et al. (2002). For data analysis, structural equation modeling was used.

**Results:** The path coefficient between anxiety sensitivity and risky behaviors with the mediation of conditional acceptance ( $\beta=.074$ ) and the path coefficient between anxiety sensitivity and risky behaviors with the mediation of unconditional acceptance ( $\beta=.087$ ) was positive and significant. The path coefficient between interpersonal trust and risky behaviors with the mediation of conditional acceptance ( $\beta=-.034$ ) and the path coefficient between interpersonal trust and risky behaviors with the mediation of unconditional acceptance ( $\beta=-.054$ ) was negative and significant.

**Conclusion:** The results of the present study showed that self-acceptance mediates the relationship between anxiety sensitivity and interpersonal trust with risky behaviors in adolescents. It is suggested to reduce the occurrence of risky behaviors by giving value to adolescents and creating reliable links for them. It is also suggested to pay attention to the level of anxiety sensitivity of adolescents with high-risk behavior in counseling and psychotherapy.

**Keywords:** Anxiety Sensitivity, Interpersonal Trust, Risky Behavior, Self-Acceptance

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## Introduction:

Adolescence is a period of human development where profound changes occur in the physical and psychological structure of a person (1). The structural and psychological changes that occur during puberty for an adolescent are considered fundamental developmental crises (2). Adolescence is a transition stage from childhood to adulthood and youth, and the health of adolescents and young people is of great importance, considering that they constitute a large percentage of the population of each country (3). It is during this period that most behavior problems for adolescents usually arise. Behavioral and emotional problems of adolescents on the one hand and environmental pressures (parents, school, etc.) on the other hand lead to their adaptation problems in different fields. Adolescent incompatibility is one of the important issues of families and schools, and it is one of the phenomena that has become more visible in the present era. During adolescence, to prove themselves and their place in society and family and to have a role and a base for themselves, they may turn to destructive and risky behaviors (4). Risky behaviors in childhood and adolescence are the beginning of a pattern of behavior that may continue until adulthood and affect his health and well-being (5). Risky behaviors that include the consumption and abuse of cigarettes, alcohol, drugs, and sexual behaviors outside the norm usually begin before the age of 18 (6).

Adolescents are expected to display behaviors that are following the norms of society and are liked by the people around them so this issue is one of the valuable goals of every society (7) and thus one of the fundamental issues that adolescents face is the causes of risky behaviors in children and adolescents (8). One of the serious health-threatening cases that have been considered by health organizations, law enforcers, and social policymakers as one of the most important problems in society in recent years due to rapid social changes, is the prevalence of risky behaviors among adolescents. Risky behaviors have many negative consequences not only for the individual but also for his family and society. Today, the prevalence of risky behaviors among young people is one of the most important and widespread concerns of human societies. Some of these behaviors are the cause of some deaths in adolescents and young people and have negative effects on societies. An increase in the death rate during adolescence, contracting AIDS and infectious diseases caused by sexual intercourse, diseases caused by smoking and drug use, premarital pregnancies, a decrease in the quality of life, etc. are among the consequences of the spread of risky behaviors among adolescents (9).

Among the individual variables, self-acceptance seems to have a direct effect on the risky behaviors of adolescents. Self-acceptance is especially important in critical times of life such as adolescence (10). Self is a set of characteristics that make a person different from others or similar to others. Self-study has three dimensions: 1) self-concept, which is related to personal beliefs about oneself; 2) self-esteem or a person's evaluation of his characteristics; 3) Self-introduction or behaviors that a person adopts to create a certain perception in others (11). Self-esteem is a feeling of satisfaction and self-acceptance that originates from a person's perception of his worth, attractiveness, worthiness, and ability to fulfill his desires. It is obvious that self-esteem is an opinion, not a nature, and it means different things to different people. Self-esteem should be considered as a need, an attitude resulting from self-satisfaction, a necessary condition for

progress, and a criterion for measuring mental health (12). Conceptually, self-acceptance is an effort to understand one's behavior, motivation, and feelings, and emphasizes the positive aspects of current and past life (10). It seems that conditional self-acceptance is one of the factors that cause anxiety and tension, while unconditional self-acceptance provides individual adaptation. Conditional self-acceptance results in adolescents focusing too much on evaluation criteria and comparing themselves with others, perfectionism, inconsistent cognitions, and vulnerability in interpersonal experiences (13). In this regard, Arabnejad et al. (14) found in a study that the feeling of self-worth and self-acceptance as an effective internal personal characteristic acts as a protective shield against the tendency of adolescents to risky behaviors and the manifestation of risky behaviors at this age. Paloş & Vişcu (15) showed that conditional self-acceptance is related to negative automatic thoughts and anxiety.

During adolescence, the family is an important source of support and education. The family is one of the most central educational environments that play an important role in maintaining the mental, social, and physical health of children. In addition, parents are one of the most important factors influencing the psychological adjustment of children and adolescents (4). Among the factors that play a role in the occurrence of risky behaviors in adolescents are the family and its functioning. Family, as the first supporting factor of an adolescent, can have a significant effect on his behavioral, psychological, and personality problems. According to the variables of the family environment, even during puberty, the family plays an essential role in several different areas of competence and adjustment of the adolescent (16).

In addition, continuous experiences with an available caregiver and a sensitive response to the child's distress form safe patterns of relationships that include a sense of self-worth and other worth (17). Parents' expectations are also effective in children's self-esteem and self-acceptance. Overthinking and controlling parents who have high expectations of themselves and their children (18), set very perfectionistic and extreme standards for their children; So that the excessive worry of failure makes these children prone to conditional acceptance and anxiety sensitivity (19) and lack of behavioral and emotional control (20). Since adolescents are exposed to various events in the environment of peers and friends, school, and home, they experience mental health problems including anxiety to a great extent (21). Anxiety is a basic emotion that includes emotional components, and sensory and cognitive perceptions (22). Anxiety is one of the most common psychiatric symptoms and a psychological state characterized by worrying expectations and fear (23). Anxiety sensitivity is a concept that has become increasingly important in research related to anxiety and worry (24). Anxiety sensitivity explains people's pre-preparedness for fear and catastrophic interpretations of anxiety symptoms and causes the continuation of anxiety disorders, as it is listed among the etiological factors involved in anxiety disorders. Anxiety sensitivity, which causes bias in the process of processing emotional information, as well as the recovery of this information in the face of arousing stimuli (25) and also leads to a person's avoidance of being in situations with high physiological arousal (26).

In this regard, Mohseni et al. (27) suggested that there is a relationship between the dimensions of mental health, including the experience of anxiety and risk-taking and risky behaviors in

adolescence. McLaughlin & Hatzenbuehler (28) concluded that anxiety sensitivity plays a mediating role in the relationship between stressful life events and externalized behaviors in adolescents. Van Petgem et al. (29) proposed that anxiety sensitivity in adolescents affects their evaluation of events. Walęcka-Matyja (30) has suggested that the extent to which a adolescent accepts and values herself can be very productive and influential in his life. According to Yang et al. (31), more self-acceptance leads to more desirable social behaviors, more adaptive coping with stress, and more self-confidence in achieving goals.

Self-acceptance results from interpersonal experiences and is the driving force behind interpersonal behaviors that contribute to the quality and success of relationships. According to self-affirmation theory, people strive to be seen by others as they see themselves and therefore seek confirmation of their evaluations. As a result, people should behave in a way that is consistent with their views and behave in a way that creates similar impressions in others (32). Theoretical frameworks such as Bowlby's attachment theory and Erikson's psychosocial stages convey the importance of interpersonal trust as an important aspect of adaptive psychosocial functioning throughout life, which begins at the beginning of development. In adolescence, interpersonal trust is associated with changes in social behavior and interpersonal relationships, such as spending more time with peers than with family members, especially due to changes that occur in the social-cognitive areas of the brain during this developmental period (33).

One of the basic principles of social life is to have trust in each other, and if people in the society do not have trust and confidence in each other, it will be difficult to continue living in such a society. Trust is formed when people can predict their actions based on interaction with others, and after it is formed, it affects how they behave with others (34). Trust is defined in two levels, interpersonal trust, and generalized trust. Interpersonal trust is having confidence in family members, relatives, and friends. But public trust goes beyond interpersonal trust (35). In this regard, Rahmani et al. (36) concluded that paying attention to the physical, psychological, and social requirements of adolescence and acknowledging the competencies of adolescents in social roles (assurance of value), and having reliable links can be effective in reducing the occurrence of risky behaviors in them. Aebi et al. (37) found that interpersonal trust in adolescents is related to delinquent behaviors, behavioral disorders of adolescents, and criminal recidivism.

In general, it can be said that risky behaviors that occur in some adolescents during adolescence have not only short-term consequences, but also unfavorable consequences for the adolescent, family, and society, and identifying the factors that affect the manifestation of risky behaviors in adolescents add to the importance and necessity of this research. It seems that adolescents who have achieved conditional self-acceptance in the family environment and under the supervision of their parents, instead of unconditional self-acceptance, are more vulnerable to experiencing risky behaviors and in a way, they are more prepared for the experience anxiety, which is referred to as anxiety sensitivity, which affects both their self-acceptance and their risky behaviors. Due to the importance of trust for adaptive psycho-social functioning, deficits in interpersonal trust have been identified as correlates of psychopathology in adolescence. Therefore, the purpose of the present

study was to predict risky behaviors in adolescents based on anxiety sensitivity and interpersonal trust with the mediation of self-acceptance.

### **Research Method:**

The current research was a descriptive-correlational type. The statistical population of the research included all adolescents aged 14 to 18 in Tehran in the academic year of 2018-2019. To determine the size of the sample, considering that in the research with the approach of modeling and path analysis, a sample size of 300 to 450 people has been proposed (38). The sample of the study was 500 people, taking into account the probability of sample dropout, and they were selected by the available sampling method from 10 schools in Tehran. The criteria for entering the research were volunteer consent, age 14 to 18 years, and no history of receiving psychological treatment.

The tools used in this research were as follows:

**Risky Behaviors Questionnaire by Mohammadkhani:** The Risky Behaviors Questionnaire is created by Mohammadkhani in 2008 includes 72 items which 7 subscales of smoking and hookah consumption, alcohol consumption, psychoactive substance consumption, aggressive behaviors, suicidal thoughts and attempts, escape, and communication with the opposite sex which evaluates in a five-point Likert scale from completely disagree= 0, disagree= 1, neither disagree nor agree= 2, agree= 3 to completely agree= 4 and a higher score in this tool indicates the occurrence of more risky behaviors. For this tool, Mohammadkhani (39) has reported a reliability coefficient of .87 and the ability to separate adolescents with risky behaviors from healthy adolescents as an indicator of the tool's validity. Maktabi et al. (40) reported a Cronbach's alpha coefficient of .64 for this tool and used the construct correlation method to calculate the validity of the Risky Behaviors Questionnaire, and the results indicated that all items have a significant relationship with the total score of the questionnaire in a range from .26 to .47.

**Unconditional Self-Acceptance Questionnaire by Chamberlain & Haaga:** Unconditional Self-Acceptance Questionnaire is created by Chamberlain & Haaga in 2001 for age groups above 14 years of age includes 20 items which 2 subscales of unconditional self-acceptance and conditional self-acceptance evaluates in a 7-point Likert scale from completely false= 1 to completely true= 7 and a higher score in this tool indicates more unconditional self-acceptance. Chamberlain & Haaga (41) reported a Cronbach's alpha coefficient of .72 for this tool. The convergent validity of this questionnaire was checked through the correlation of its scores with the scores of the Rosenberg Self-Esteem Scale, and its correlation coefficient was .37 (41). For this tool, Shafiabadi & Niknam (42) reported Cronbach's alpha coefficient of .70 and adequate content validity, and the correlation of unconditional self-acceptance subscale with positive perfectionism equal to .49 and with negative perfectionism equal to -.25.

**Anxiety Sensitivity Index by Reiss et al.:** Anxiety Sensitivity Index is created by Reiss et al. in 1986, includes 16 items which 3 subscales of physical concerns, social concerns and cognitive concerns evaluates in a 5-point Likert scale from very little= 0 to very much= 4 and a higher score in this tool indicates greater anxiety sensitivity. Reiss et al. (43) reported a retest coefficient of .77 for this tool and the correlation of this tool with the anxiety frequency checklist equal to .56 as an



indicator of the validity of the tool (43). Moradimenesh et al. (44) reported the reliability of this tool based on three methods, internal consistency, retesting, and discriminating, with reliability coefficients of .93, .95, and .97, respectively. Validity was calculated based on three concurrent validity methods, correlation of subscales with the total scale and with each other and factor analysis. Concurrent validity was performed through simultaneous implementation with the SCL-90 questionnaire, which resulted in a correlation coefficient of .56.

**Mental Toughness Questionnaire by Clough et al.:** Mental Toughness Questionnaire is created by Clough et al. in 2002 includes 48 items, which 6 subscales of challenge (8 items), emotional control (7 items), life control (7 items), commitment (11 items), confidence in one's own abilities. (9 items) and interpersonal trust (6 items) evaluates in a 5-point Likert scale from completely disagree= 1, disagree= 2, have no opinion= 3, agree= 4 to completely agree= 5. Afsanepurak & Vaez Mousavi (46) calculated Cronbach's alpha coefficients for the total score of the tool and the subscales of challenge, commitment, control, emotional control, life control, trust, trust in abilities, and interpersonal trust, 0.93, 0.77, 0.80, 0.84, 0.78, 0.81, 0.86, 0.81 and 0.81 respectively. In the study of Afsanepurak & Vaez Mousavi (46), the results of confirmatory factor analysis showed that the six-factor model of the questionnaire has a good fit. In the present study, only the interpersonal trust subscale was considered.

After obtaining informed consent and observing ethical considerations, the questionnaires were provided to the participants and the necessary guidance was given to complete them. Out of 500 students, 496 were eligible for analysis. For data analysis, after checking the assumptions of normality, for which the range of  $\pm 2$  was considered and checked by using skewness and kurtosis indices, multivariate normality by using Mahalanobis Distance, absence of collinearity between independent variables using the tolerance coefficient and variance inflation with a cut-off line greater than 0.1 and smaller than 10, respectively, and ensuring their establishment and the correlation test of the variables using the Pearson correlation matrix method, using the structural equation modeling method, using AMOS software and a significance level of 0.05 and chi-square goodness of fit indices with a probability value greater than 0.05; the root mean square error of approximation with a cut point smaller than 0.08; adjusted goodness of fit index with a cut point smaller than 0.90; goodness of fit index with a cut point smaller than 0.95 and comparative goodness index with a cut point smaller than 0.95 were used (47).

### Findings:

The mean  $\pm$  standard deviation of the age of adolescents was  $17.39 \pm 15.92$ . In the current study, 93 people (18.8 percent) of the participants were 14 years old, 121 people (24.4 percent) were 15 years old, 113 people (22.8 percent) were 16 years old, 70 people (14.1 percent) were 18 years old, and 99 people (20 percent) were 18 years old. There were 296 girls (59.68 percent) and 200 boys (40.32 percent) in the present study.

**Table 1. Research Correlation Matrix**

Variables	1	2	3	4	5	6
<b>1. Interpersonal trust</b>	-					
<b>2. Anxiety sensitivity-physical concerns</b>	-.087	-				
<b>3. Anxiety sensitivity- cognitive concerns</b>	-.068	.428**	-			
<b>4. Anxiety sensitivity- social concerns</b>	-	.434**	.456**	-		
	0.138**					
<b>5. Unconditional acceptance</b>	.250**	-	-	-	-	
		.158**	.225**	.239**		
<b>6. Conditional acceptance</b>	-.154**	.093*	.128**	.156**	-	-
					.435**	
<b>7. Risky behaviors- aggression</b>	-.170**	.165**	.148**	.143**	-	.341**
					.311**	
<b>8. Risky behaviors- escape</b>	-.187**	.145**	.130**	.095*	-	.260**
					.291**	
<b>9. Risky behaviors- relationship with the opposite sex</b>	-.298**	.124**	.206**	.187**	-	.313**
					.298**	
<b>10. Risky behaviors- tendency to suicide</b>	-.182**	.149**	.155**	.171**	-	.336**
					.380**	
<b>11. Risky behaviors- smoking/hookah</b>	-.167**	.103*	.089*	.169**	-	.399**
					.387**	
<b>12. Risky behaviors- alcohol consumption</b>	-.144**	.094*	.120**	.136**	-	.419**
					.393**	
<b>13. Risky behaviors- drug use</b>	-.048	0.23	.030	.070	-	.282**
					.240**	
<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>
-						
.674**	-					
.443**	.482**	-				
.306**	.356**	.663**	-			
.455**	.462**	.605**	.685**	-		
.468**	.520**	.507**	.573**	.824**	-	
.254**	.287**	.187**	.260**	.464**	.610**	-

Table 1 shows the correlation between the dimensions of anxiety sensitivity, interpersonal trust, self-acceptance and risky behaviors.

In the structural model, it was assumed that anxiety sensitivity and interpersonal trust both directly and through the mediation of self-acceptance dimensions predict risky behaviors in adolescents. The use of structural equation modeling showed that all fit indices of the structural model had an acceptable fit ( $\chi^2$  (df= 56, N=496) =272.165,  $\chi^2$ /df=4.86, CFI=.917, GFI=.925, AGFI=.878 and RMSEA=.088).

**Table 2.** Total, Direct and Indirect Path Coefficients between the Research Variables in the Structural Model

	Path	b	S.E	$\beta$	sig
<b>Total path coefficient</b>	Interpersonal trust → risky behaviors	- .077	.027	- .169	.003
	Anxiety sensitivity → risky behaviors	.150	.052	.236	.001
<b>Direct path coefficient</b>	Interpersonal trust → conditional acceptance	- .262	.110	- .119	.021
	Interpersonal trust → unconditional acceptance	.394	.089	.201	.001
	Interpersonal trust → risky behaviors	- .035	.022	- .077	.101
	Anxiety sensitivity → conditional acceptance	.707	.251	.232	.005
	Anxiety sensitivity → unconditional acceptance	- .883	.219	- .325	.001
	Anxiety sensitivity → risky behaviors	.048	.037	.075	.191
	Conditional acceptance → risky behaviors	.066	.013	.317	.001
	Unconditional acceptance of risky behaviors	- .063	.014	- .269	.001
<b>Indirect path coefficient</b>	Interpersonal trust → risky behaviors	- .042	.014	- .092	.002
	Anxiety sensitivity → risky behaviors	.102	.035	.161	.001

Table 2 shows that the total path coefficient (sum of direct and indirect path coefficients) between anxiety sensitivity and risky behaviors was positive and significant at the .01 level ( $P < .01$ ,  $\beta = .236$ ). The total path coefficient (sum of direct and indirect path coefficients) between interpersonal trust and risky behaviors was negative and significant at the .01 level ( $P < .01$ ,  $\beta = -.169$ ). The indirect path coefficient between interpersonal trust and risky behaviors was negative and significant at the



0.01 level ( $p < .01$ ,  $\beta = -.092$ ). On the other hand, the indirect path coefficient between anxiety sensitivity and risky behaviors was positive and significant at the .01 level ( $p < .01$ ,  $\beta = .161$ ).

**Table 3.** Significance Test of the Mediating Role of Conditional Acceptance and Unconditional Acceptance in the Relationship between Interpersonal Trust and Anxiety Sensitivity with Risky Behaviors

Path	a*b	$\beta$	S.E <sub>a*b</sub>	Z
Interpersonal trust → conditional acceptance → risky behaviors	-.017	-.034	.008	-2.16*
Interpersonal trust → unconditional acceptance → risky behaviors	-.029	-.054	.008	-3.62**
Anxiety sensitivity → conditional acceptance → high-risk behaviors	.047	.074	.019	2.47*

Table 3 shows that the path coefficient between anxiety sensitivity and risky behaviors with the mediation of conditional acceptance ( $P < .05$ ,  $\beta = .074$ ) was positive and significant at the .05 level. The path coefficient between anxiety sensitivity and risky behaviors with the mediation of unconditional acceptance ( $P < .01$ ,  $\beta = .087$ ) was positive and significant at the .01 level. The path coefficient between interpersonal trust and risky behaviors with the mediation of conditional acceptance ( $P < .01$ ,  $\beta = -.034$ ) was negative and significant at the .05 level. The path coefficient between interpersonal trust and risky behaviors with the mediation of unconditional acceptance ( $P < .01$ ,  $\beta = -.054$ ) was negative and significant at the .01 level.

### Discussion and conclusion:

The results of the present study showed that self-acceptance mediates the relationship between anxiety sensitivity and interpersonal trust with risky behaviors in adolescents. The results of the current research with the results of Paloş & Vişcu research, which concluded that self-acceptance is related to anxiety (15); Arabnejad et al., (14) who mentioned the relationship between self-worth and risky behaviors (14); McLaughlin & Hatzenbuehler (28) who concluded that anxiety sensitivity plays a mediating role in the relationship between stressful life events and externalized behaviors in adolescents; Van Petegem et al. (29) suggested that anxiety sensitivity in adolescents affects their perception of environmental events and Wałęcka-Matyja (30) who mentioned the constructive role of feeling of self-worth and self-acceptance in adolescents and Yang et al. (31) who pointed to the role of self-acceptance in desirable social behaviors; Rahmani et al. (36) who stated that confidence in one's values and social trust are predictors of desirable social behaviors and Aebi et al. (37) who found that interpersonal trust is correlated with juvenile delinquency/behavioral disorders and criminal recidivism.

In explaining the present findings, it can be said that parents who facilitate communication between themselves and their children in various ways such as spending time with them, being warm and

responsive and providing positive emotional resources; Showing interest in the child and the child's activities, as well as reaching a common understanding with the children about daily events, support the children's autonomy; In such a way that these parents approve and strengthen the child's behavior with their heart's content and away from coercive behavior (48). In contrast to these parents, there are controlling parents who put too much emphasis on the consequences of their affairs by pressuring their children, and by interfering in their child's affairs, they deprive the child of the opportunity to solve problems, so that instead of internal motivation, they create external motivation for the child's behavior in the future (18). Over time, the children of first-class parents, when they encounter the warmth and love of their parents and grow, master their anxiety and other emotional states (19) and they achieve behavioral and emotional self-regulation that comes from expressing their behaviors and emotions without fear of their parents (20), which is considered one of the important developmental changes during adolescence (2). Wei & Kendall (49) believe that at the other end of the continuum of parental acceptance, parental rejection, and criticism is located. Parents' rejection and criticism, in addition to causing emotional dysregulation, reduce the sense of self-worth/competence in children. This parenting style is effective in children's attribution regarding the external environment so that these children see the control of affairs beyond their authority, and subsequently, it causes an increase in anxiety and stress in them. In general, the child's perception of his parents' behavior shapes his anxiety sensitivity. Parents who do not pay attention to the positive aspects of the child's behavior and do not strengthen his achievements and social-friendly behaviors, cause the child to show excessive sensitivity to anxiety and alarm due to harsh parenting, perceive their surroundings as threatening and adopt the necessary emotional regulation and coping strategies to manage anxiety symptoms, finally, these children also show adjustment problems (19). Adolescents with high anxiety sensitivity often react negatively to anxiety symptoms an adolescent's assessment of a stressful situation plays a decisive role in its subsequent consequences (28). Anxiety sensitivity in an adolescent affects his evaluation of events and causes the perception of social incompetence and lack of learning intra-personal and interpersonal skills, lack of self-acceptance, and feelings of inadequacy and unworthiness in him, which is associated with behavioral consequences (29). In general, it can be said that if the parents show positive acceptance only conditionally, that is, only on the condition that the adolescent presents the correct behavior, thoughts, and feelings, then the self-concept of the adolescent will be damaged, and they will suffer from anxiety caused by anxiety sensitivity and when his behavior is not approved, they inevitably incorporate this experience into their self-image and come to the conclusion that they are bad and feel ashamed; Either they think their parents don't love them and therefore they feel rejected, or they deny their feelings.

Man lives in society, and inevitably, some of his behaviors are related to social interactions or are somehow influenced by social factors. So that the behavior of a person in solitude will be different from the behavior that he shows in the assembly. During the growth period, the child learns new behaviors by establishing new interactions with new peer groups and reflects many of them in his social behaviors (50). According to Rotenberg et al. (51), interpersonal trust can be based on three basic concepts: reliability, emotional trust, and honesty. Reliability refers to the belief that others

will or will follow through on their promises. Emotional trust refers to the belief that others will refrain from causing harm and maintain confidentiality. Honesty can be seen as the belief that others act honestly and without manipulation (51). Interpersonal trust depicts a social dilemma because trusting another person is always associated with the risk of being deceived or exploited, although high levels of social trust seem beneficial to an individual. Because the experience of trusting relationships with primary caregivers is an important basis for the moral development of children and adolescents. Moral defects are consistently associated with risky and abnormal behavior in youth and adults. Also, the adversities and behavioral problems of childhood affect the neural development to recognize emotions and feelings of oneself and others. The ability to create reliable social relationships is an important factor in stimulating cognitive and emotional empathy (37).

Interpersonal trust, which is founded in early attachment relationships, is not only critical in normative development, but may be an important risk or protective factor for adolescent psychopathology (52), otherwise, adolescents will develop false concepts of the world and in adulthood become enemies of themselves and society (35); Mistrust in interpersonal relationships causes adolescents to perceive relationships as very damaging and full of dishonesty, deception, and abuse, and in the absence of a sense of self-acceptance and self-esteem, adolescents resort to impulsive behaviors to escape from these injuries. Adolescents and young people will adopt healthier behaviors if they have grown up in conditions of unconditional positive acceptance that are valuable in the eyes of parents and others, even when their feelings, attitudes, and behavior are not ideal, and in such a situation, positive acceptance causes self-acceptance in adolescents. Generally, adolescents should consider themselves valuable human beings regardless of their achievements, accept all their strengths and weaknesses, strengthen their strengths, and improve their weaknesses. It causes him to avoid risky and harmful behaviors (30).

### **Ethical considerations**

In this research, ethical principles such as secrecy, confidentiality, and privacy of individuals were respected and the participants were assured that participating in the research does not cause any possible harm to the participants.

### **Research limitations**

Every research has its limitations. Among the limitations of the current research, can mention the following: In this research, a self-report tool was used to measure risky behaviors, which may consciously or unconsciously try to make themselves look good and deny the level of risky behaviors.

It is possible that the demographic characteristics of the participants, such as the characteristics of the parents and the socio-economic class, which the researcher had no control over, may have affected the occurrence of risky behaviors and the results of the present study.

### **Suggestions**

It is suggested that future researchers conduct qualitative research using the observation method to examine risky behaviors and identify other influencing factors. It is suggested that the features

related to parents should be controlled or investigated in future research. It is suggested that the present research should be conducted on people with different socio-economic classes. Considering the effect of interpersonal trust and self-acceptance on the occurrence of risky behaviors, it is possible to reduce the occurrence of risky behaviors by giving value to adolescents and creating reliable links for them. It is also suggested to pay attention to their anxiety sensitivity in the counseling and psychotherapy of adolescents with risky behaviors. Since age has a negative effect on the occurrence of risky behaviors, it is suggested to start programs to prevent the occurrence of risky behaviors from a younger age and before the adolescent enters the second stage of adolescence, i.e. before the age of 15.

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