

EXPLORING THE MEDIATING ROLE OF PERCEIVED STRESS BETWEEN NEUROTICISM AND RISK-TAKING BEHAVIOR AMONG ADULTS

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ABSTRACT

The purpose of this study was to explore the role neuroticism and perceived stress in predicting risk taking behaviors. The research was designed to get an understanding that how neurotic personality trait effect the decision making or risk-taking behaviors of individual and how perceived stress plays a role in taking decisions of neurotic personality. Neurotic people have more frequent and severe negative feelings, such as worry and mood swings. Low neuroticism suggests emotional stability and a relaxed disposition. These constructs' interactions can be bidirectional. Individuals with high neuroticism, for example, may engage in risk-taking behaviors as a maladaptive strategy to cope with perceived stress. Risky actions, on the other hand, may intensify perceived stress in these persons due to potential negative repercussions. The data were collected from a sample of N=250 both males and females from the adults. The scale used to measure the variables are, the perceives stress scale (PSS) was used for the purpose of measuring the stress, Big five inventory (BFI) was used to measure the neuroticism and the adolescent risk-taking questionnaire (ARTQ) was used for the purpose of measuring risk taking behaviors. Results of the analysis indicated that study variables are significantly related with each other. Neuroticism has significantly positive related with perceived stress and risk-taking behaviors, and risk-taking behaviors significantly positively related to perceived stress. Also, there are significant gender difference in neuroticism as female scores high in neuroticism than males. Mediation analysis revealed that there is no mediation effect of perceived stress over neuroticism and risk-taking behavior.

Keywords: Neuroticism, risk-taking behavior, perceived stress

INTRODUCTION Big Five Inventory

The Big Five Inventory (BFI) is a popular psychological assessment tool that assesses personality qualities using the Five Factor Model (FFM), popularly known as the Big Five personality traits. Openness to Experience, Conscientiousness, Extraversion, Agreeableness, and Neuroticism (commonly abbreviated as OCEAN) are the five qualities. These characteristics offer a complete foundation for comprehending and categorizing human personality (John et al., 2008).

Openness to Experience

This characteristic displays a person's openness to new ideas, feelings, and experiences. Individuals with a high level of openness are inventive, curious, and open-minded. They are more likely to be open to new ideas and love creative pursuits (McCrae et al., 1992).

Extraversion

Extraversion is a person's desire for social connection and enjoyment of being in the company of others. Extraverts are people who are outgoing,

forceful, and energetic. They thrive in social situations and are usually lively and outspoken (McCrae et al., 1992).

Agreeableness

Agreeability assesses a person's proclivity for cooperation, compassion, and harmony in relationships. Individuals with a high level of agreeableness are kind, cooperative, and caring. They love interpersonal relationships and are typically warm-hearted and friendly (McCrae et al., 1992).

Neuroticism

Neuroticism, often known as emotional instability, is concerned with an individual's emotional resilience and stability. Neurotic people have more frequent and severe negative feelings, such as worry and mood swings. Low neuroticism suggests emotional stability and a relaxed disposition (McCrae et al., 1992).

Conscientiousness

Conscientiousness relates to a person's level of organization, responsibility, and self-discipline. Individuals with high conscientiousness are dependable, hardworking, and well-organized. They set and achieve goals and are widely regarded as reliable and trustworthy (McCrae et al., 1992).

Neuroticism

Neuroticism is a fundamental personality trait that relates to the proclivity to experience negative emotions such as anxiety, despair, moodiness, and irritability. Individuals with strong neuroticism are more prone to perceive and react emotionally to ordinary occurrences. This personality attribute is one of the Big Five, which is a widely acknowledged framework for describing and categorizing personality (Costa Jr. & McCrae, 1992).

Neuroticism is operationally defined as items referring to irritability, anger, melancholy, anxiety, worry, hostility, self-consciousness, and vulnerability that have been found to be significantly linked with one another in factor analyses. (Goldberg, 1993) Neuroticism is a broad personality trait dimension in psychology and development that represents the degree to which a person perceives the world to be upsetting, dangerous, and hazardous. Each person can be found anywhere on this personality dimension between the extremes of flawless emotional stability and full emotional disorder. Individuals who are highly neurotic are often labile (that is, their emotions change rapidly),

worried, tense, and withdrawn. Individuals with low neuroticism are content, confident, and stable. The latter report less physical and psychological issues, as well as less stress, than highly neurotic people (Lahey, 2009).

Dissatisfaction and distress are connected with neuroticism. Neurotic people (those who score high on the neuroticism scale) are often dissatisfied with themselves and their lives. They are more prone to report minor health issues and overall discomfort in a variety of scenarios. Neurotic people are more likely to experience negative emotions (such as anxiety, melancholy, wrath, and guilt). According to an empirical research, excessively high degrees of neuroticism are related with chronic and pervasive misery in both neurotic people and those near to them. The idea of neuroticism derives from Sigmund Freud's and his followers' psychoanalytic beliefs. The term "neurosis" was coined by Sigmund Freud to designate a group of psychiatric diseases marked by emotional distress and inner struggle. This idea evolved over time into the broader trait of neuroticism, as studied in personality psychology. (Watson & Clark, 1984). The work of scholars such as Hans Eysenck and Raymond Cattell had a substantial impact on modern understanding and measurement of neuroticism. Neuroticism was one of three key features in Eysenck's personality model, along with extraversion and psychoticism (Eysenck, 1967). Later, the Big Five model emerged as a more comprehensive framework for personality traits, with neuroticism as a key factor. Neuroticism also plays a part in Big Five personality tests, such as the NEO Personality Inventory. Neuroticism is also reflected in clinical psychological assessments, such as the newly formed "Demoralization" scale on the Minnesota Multiphasic Personality Inventory-2 (Costa Jr. & McCrae, 1992).

Neuroticism refers to a set of emotional and behavioral inclinations. Individuals with high levels of neuroticism are more prone to worry, anxiety, tension, and mood swings. They frequently have strong reactions to perceived dangers or challenges and may struggle to cope with pressures. Neurotic people may also be more sensitive to negative feedback, which can lead to feelings of inadequacy or low self-esteem. Individuals with low neuroticism, on the other hand, tend to be more emotionally stable, resilient in the face of stress, and less prone to feeling extreme negative emotions. Neuroticism has been linked to a variety of consequences and behaviors. A

high level of neuroticism is associated with an increased risk of acquiring mood disorders such as depression and anxiety disorders. It can also have an impact on interpersonal relationships, performance, and general happiness. Anxiety, anger, melancholy, self-consciousness, impulsiveness, and vulnerability are all scales that measure different aspects of neuroticism. According to Tepper (2007), both anxiousness and angry hostility have the capacity to elicit emotions that might lead to activities viewed as abusive supervision by their subordinates, such as telling subordinates that their views or feelings are dumb or demeaning subordinates in front of others. Among the different personality qualities, neuroticism is a leading candidate as a risk factor for a variety of mental diseases. The strong relationship between neuroticism and depression has been widely studied, and it has been demonstrated that neuroticism predicts the onset of major depression and increases the prevalence of major depression in conjunction with extreme stressful life events, i.e., psychological stressors. Previous research utilizing structural equation modeling shown that the effects of childhood maltreatment on the development of depressive symptoms in adulthood after stressful life events were mediated by increasing neuroticism. High trait neuroticism is a well-known risk factor for the development of psychopathology (Ormel, J, 2004) and is important in the etiology and progression of a variety of psychological illnesses across the lifespan, including later adulthood. Indeed, the link between high trait neuroticism and poorer psychological well-being has been found to be higher in middle-aged and older persons than in younger adults. Early research reveals that people with high trait neuroticism are more prone to perceive ambiguous events as negative or dangerous than people with low trait neuroticism. Higher trait neuroticism is associated with higher baseline stress perception and heightened ratings of perceived threat as compared to lower trait neuroticism (Schneider, 2004).

According to (Hogan & Roberts, 2004) as people age, they strive for personality maturity as viewed by others, which includes being liked, appreciated, and respected. In terms of Five Factor Model qualities, they believe that becoming more pleasant, emotionally stable, and conscientious is the way to go. Neo-Eriksonian theories of life course development, such as the emerging adulthood model,

can also assist explain why personality change happens in young people (Arnett, 2000). In 2014, Hennecke, Bleidorn, Denissen, and Wood suggested a model of self-regulated personality transformation that specifies requirements for goal-directed efforts to modify one's personality or behavior. These are the perceived worth of the objective state and the belief that efforts will be fruitful. According to the approach, goals will only result in long-term change if the accompanying behaviors become habitual. Taking up relaxation techniques or mindfulness, for example, will only lessen Neuroticism if the exercises or practice are done on a regular basis (Van den et al., 2011).

While numerous studies have linked neuroticism to a variety of negative affective qualities, nothing is known about how neuroticism is related to such traits in good affect. Greater neuroticism has been linked to lower overall positive affect and less variability in positive affect; however, this relationship may not extend to more specific positive emotions such as happiness and joy, and it may not hold across cultures (Ching et al., 2014).In terms of reactivity, neuroticism does not predict people's responsiveness to negative situations (Leger et al., 2016). Overall, the findings are mixed, and further research is required to investigate. Neuroticism is a core component of many generally accepted personality taxonomies (Costa and McCrae, 1992) and a highly effective predictor of psychopathology, particularly depression and anxiety disorders (Ormel et al., 2013). In the face of pressures, high neurotic persons tend to see events as more hazardous ('negativity bias'), react more emotionally to unfavorable situations, and use maladaptive coping techniques (Suls and Martin, 2005)

Neuroticism in Pakistan

Neuroticism in Pakistan has garnered increasing attention in recent years, with researchers conducting various studies to better understand the prevalence and implications of this personality trait within the country's diverse and culturally rich context. Neuroticism, one of the Big Five personality traits, is characterized by a tendency to experience negative emotions such as anxiety, fear, and moodiness. It has been the subject of significant research in psychology, as it is associated with various aspects of mental well-being and can influence how individuals perceive and respond to life's challenges.

Prevalence and Impact of Neuroticism in Pakistan

Studies on neuroticism in Pakistan have sought to shed light on its prevalence and impact. These studies often employ psychometric measures and surveys to assess the level of neuroticism among different segments of the population, including youth. They explore how cultural, societal, and environmental factors specific to Pakistan might contribute to the development and manifestation of neurotic traits.

Several Factors Play a Role in the Prevalence of Neuroticism in Pakistan

Societal Pressures

Pakistani society places significant importance on traditional values, family dynamics, and community expectations. These can create pressures and stressors that may contribute to higher levels of neuroticism, particularly among youth who are navigating the complex transition from adolescence to adulthood. Rahman, F., & Khan, A. M. (2017)

Economic Challenges

Economic disparities and limited access to resources can lead to financial stress, which is closely related to neuroticism. Many young people in Pakistan face these challenges, impacting their mental well-being (Naeem et al., 2018).

Educational Stress

High expectations for academic achievement can contribute to anxiety and neuroticism among young students, driven by the desire to secure a prosperous future. (Khan et al., 2015). Researchers in Pakistan have conducted numerous studies to examine the prevalence of neuroticism and its association with various mental health outcomes. Some studies have focused on specific groups, such as college students, to understand how neuroticism may affect their overall well-being and academic performance. These studies often standardized assessment tools, such as the Big Five Personality Inventory, to measure neuroticism and assess its relationship with psychological distress, depression, and anxiety. In addition to quantitative studies, qualitative research has explored the subjective experiences of neuroticism in Pakistan. Interviews and focus groups have provided insights into how individuals perceive and cope with their neurotic tendencies. These studies often uncover the strategies used by Pakistani youth to manage their emotional well-being, including seeking social support, practicing mindfulness, and relying on religious coping mechanisms.

Perception of Neuroticism among Pakistani Youth

The perception of neuroticism among Pakistani youth is not uniform and varies among individuals. It's influenced by cultural, familial, and educational factors. Some may view neuroticism as a natural response to the challenges they face in their lives, while others might stigmatize mental health issues, including neurotic symptoms. Social stigma can make it difficult for young individuals to openly acknowledge their emotional struggles and seek help or support. In conclusion, neuroticism is a multifaceted personality trait that impacts individuals differently, and its prevalence and perception among Pakistani youth are shaped by cultural, societal, and economic factors. Research and awareness efforts are ongoing to better understand and address the challenges associated with neuroticism in Pakistan, with the goal of improving the mental well-being of the country's youth.

Factors Influencing Neuroticism *Genetic Factors*

Research suggests that genetics play a significant role in the development of neuroticism. Studies with twins have shown that identical twins, who share all their genes, tend to have more similar levels of neuroticism than non-identical twins. This indicates a hereditary component to the trait. (Kendler et al., 2007).

Childhood Experiences

Early life experiences, especially adverse ones such as traumatic events or a lack of emotional support, can contribute to the development of neuroticism. Childhood experiences shape an individual's emotional regulation and coping strategies, which can influence their neuroticism levels in adulthood (Fergusson. 1996).

Environmental Stressors

Exposure to chronic or acute stressors in adulthood can also contribute to the expression of neuroticism. High-stress environments or experiences, such as a demanding job or a turbulent relationship, can exacerbate neurotic tendencies in some individuals (Lazarus, 1984).

Neurobiological Factors

The brain plays a pivotal role in the experience of neuroticism. Differences in the structure and functioning of brain regions associated

with emotion processing and regulation, such as the amygdala and prefrontal cortex, have been identified in individuals with high neuroticism (Servass et al., 2017).

Impact of Neuroticism on Personality

Neuroticism is a fundamental aspect of an individual's personality and can have far-reaching effects on various domains of their life. In this section, we will explore how neuroticism influences personality traits, behaviors, and interpersonal relationships.

Emotional Regulation

Individuals with high neuroticism often struggle with emotional regulation. They are more likely to experience intense emotional reactions to everyday stressors, and these emotions can be challenging to manage. As a result, they may engage in maladaptive coping mechanisms, such as avoidance or emotional eating (Gross et al., 2003).

Coping Strategies

Highly neurotic individuals may use different coping strategies than those with lower neuroticism. They may rely on strategies like seeking social support, venting, or engaging in avoidance behaviors to deal with stress and negative emotions. These strategies can impact their overall well-being and the outcomes of stressful situations (Spek et al., 2008).

Vulnerability to Mental Health Issues

Neuroticism is a significant risk factor for the development of mental health problems. Individuals high in neuroticism are more susceptible to conditions like generalized anxiety disorder, major depressive disorder, and panic disorder. The heightened emotional reactivity and sensitivity to stressors can make them more vulnerable to these conditions (Kendler et al., 2014).

Interpersonal Relationships

Neuroticism can significantly impact an individual's relationships with others. In romantic relationships, highly neurotic individuals may exhibit jealousy, insecurity, and an increased need for reassurance from their partners. This can lead to relationship conflict and difficulties. In friendships and social interactions, their emotional volatility may make it challenging for others to predict their reactions (Lahey et al., 2009).

Neuroticism and Perceived Stress

Neuroticism, a personality trait characterized by enhanced negative emotional

reactivity, is frequently linked to higher levels of perceived stress. Individuals with strong neuroticism regard everyday events as more stressful and suffer more emotional anguish even in less stressful settings (Carver et al., 1989).

Neuroticism and Risk-taking Behavior

Risk-averse and impulsive risk-taking behaviors are common in neurotic people. On the one hand, their increased worry and fearfulness may cause individuals to avoid risky circumstances in order to avoid unpleasant results. Some neurotic people, on the other hand, may engage in impulsive acts to cope with their unpleasant feelings (Strathman et al., 1994).

Risk-taking Behavior

The tendency to participate in activities that have the potential to be damaging or dangerous is referred to as risk-taking behavior. Risk-taking occurs when the advantages of an activity outweigh the risks (Zuckerman, 2007). Another operational definition of risk-taking behavior is "acting or behaving in ways that have the potential to result in negative outcomes and consequences, frequently involving uncertainty or potential harm." Smith and colleagues (2018) Individuals that engage in risk-taking behavior are more likely to engage in acts or decisions that have the potential for undesirable consequences or outcomes. Individuals who engage in risk-taking may be driven by possible benefits, excitement, curiosity, or peer influence, despite the fact that these actions frequently include a level of uncertainty and the threat of harm or loss.

It is a multidimensional term that includes a variety of activities, such as physical adventures, financial investments, and social contacts. Risktakers are willing to accept risks, embrace uncertainty, and expose themselves to potential pain or loss in pursuit of desired goals or experiences. Individual personality qualities, contextual circumstances, social standards, and personal goals can all contribute to risk-taking behavior. While taking risks can result in positive outcomes such as personal growth, innovation, or achievement, it can also result in negative outcomes such as accidents, financial loss, or harm to oneself or others. Understanding the underlying motivations, consequences, and factors affecting risk-taking behavior is therefore critical in measuring its impact and devising risk management and decision-making solutions.

Physical Risk-Taking

This involves participating in physically hazardous activities such as extreme sports, reckless driving, or substance addiction.

Social Risk-Taking

This includes public speaking, developing new relationships, and expressing unpleasant viewpoints.

Health Risk-Taking

This includes public speaking, forming new relationships, and expressing disagreeable opinions.

Cognitive Risk-Taking

This entails taking chances with decisions, such as chasing innovative prospects or employing unusual techniques.

Recreational Risk-Taking

This requires taking risks with decisions, such as pursuing novel opportunities or applying novel procedures.

Significance of Risk-Taking Behavior Personal Growth and Learning

On a personal level, risk-taking can lead to personal growth and learning. Stepping out of one's comfort zone, taking on challenges, and confronting fears can lead to increased self-confidence and resilience. (Dweck, 2006).

Creativity and Artistic Expression

In the arts and creative endeavors, risk-taking often leads to groundbreaking works. Artists, writers, and performers often push the boundaries of conventional norms and experiment with new ideas and techniques. (Sawyer, 2011).

Problem-Solving and Decision-Making

In problem-solving and decision-making, risk-taking can be a crucial component. People who are willing to take calculated risks are more likely to explore innovative solutions and make decisions based on informed judgments. (March & Shapira, 1987).

How Emotions Effect Risk Taking Behavior *Emotions*

Emotions play a critical role in risk-taking, as they can override rational decision-making processes

Fear and Anxiety

Fear and anxiety can make individuals risk-averse. They may avoid taking risks to prevent potential negative outcomes or losses.

Excitement and Euphoria

Positive emotions, such as excitement and euphoria, can lead to increased risk-taking. These

emotions can cloud judgment and lead individuals to underestimate potential negative consequences.

Anger and Frustration

Strong negative emotions like anger or frustration can lead to impulsive and risky behaviors as individuals seek to alleviate their emotional distress.

Peer Pressure

Emotional connections and the desire for social acceptance can drive individuals to take risks, especially if they believe these actions will lead to approval or popularity among their peers. Individual differences in risk-taking behavior are influenced by a variety of factors, including personality traits, cognitive development, social influences, and the context in which decisions are made. Some personality qualities, such as sensation-seeking, impulsivity, and a lack of conscientiousness, are linked to increased risk-taking. The relationship between mental health and risky conduct is complicated, with mental health disorders frequently impacting an individual's proclivity to participate in acts with potentially bad results. Depression, anxiety, and substance use disorders can affect judgment and decision-making, leading to risky behavior owing to a lack of regard for consequences. Furthermore, some people may resort to dangerous activities as coping techniques for emotional discomfort, thus increasing their mental health problems. Substance misuse may be used as a kind of self-medication, which can lead to addiction. Impulsivity, decreased caution, and social isolation as a result of mental health issues can all contribute to risky behavior. The interaction between mental health and risky behavior emphasizes the significance of holistic interventions that address both components while promoting wellbeing. Individuals may participate in dangerous behaviors for a variety of reasons, including a desire for excitement, peer pressure, impulsivity, attention seeking, or as a means to cope with stress or emotions. Understanding the reasons that drive risky behavior is critical for establishing successful solutions to reduce risky behavior and promote healthier choices. Risky conduct can have long-term and substantial repercussions on our physical health, emotional well-being, relationships, and general quality of life. These impacts have been studied and researched, providing light on the need of understanding and treating risky behaviors.

(Hawkins & Catalano, 2002) Physical health is one of the most serious repercussions of dangerous

activity. Substance misuse, irresponsible driving, and unprotected sex can all result in accidents, injuries, and long-term health problems. Alcohol and drug abuse, for example, can lead to addiction, liver damage, and cognitive impairment, whereas unsafe sexual practices can result in sexually transmitted illnesses and unwanted pregnancies (Hawkins & Catalano, 2002). Lejuez et al. (2006) investigate the association between heroin use and anxiety sensitivity, specifically among those in residential drug treatment. This study offers light on the complex relationship between substance addiction and mental health concerns. It emphasizes how dangerous habits, such as heroin addiction, are frequently associated with underlying psychological vulnerabilities, in this case, anxiety sensitivity. This highlights the significance of a holistic approach to addiction therapy that treats not just substance misuse but also the underlying psychological problems that contribute to dangerous behaviors. Risky activities can also have an impact on interpersonal connections. Individuals who engage in risky behaviors may find it difficult to sustain stable relationships as a result of their unpredictable acts and potential consequences. When loved ones experience these acts and their consequences, trust can erode, resulting in strained relationships and emotional distress.

Jessor (1977) investigate problem behavior and psychosocial development in adolescence, giving a core understanding of the elements that promote risky behavior participation. This long-term study acknowledges that risky behaviors are frequently the result of complex interplay between personal, social, and environmental factors. The study emphasizes the necessity of evaluating the broader context in which risky behaviors emerge by examining the developmental trajectories of problem behaviors. This study is fundamental in developing our knowledge of how psychological and social forces interact to influence the decisions and actions people engage in throughout their developmental journey. Furthermore, the consequences of risky behavior have a broader impact on life outcomes. Academic and professional accomplishments may be jeopardized because risky behaviors drain time and energy away from positive pursuits. Legal troubles can occur as a result of behaviors such as illegal activity or reckless behavior, which can have longterm legal and financial consequences. (Jessor & Jessor, 1977). (Anestis et al., 2007) investigated the relationship between risky behaviors such as selfharm and suicide conduct and mental health outcomes. They discovered that people who intentionally self-harm had greater rates of sadness and anxiety, highlighting the bidirectional association between risky behaviors and mental health difficulties.

A multitude of factors influence risk-taking behavior. Genetics play a role, as research has indicated that some people may be genetically predisposed to be more or less risk-averse. The environment and personal experiences also shape one's willingness to take risks. Individuals exposed to a risk-encouraging environment, like a family that embraces adventure sports, may be more inclined to take risks themselves.

The Relationship between Risk-Taking Behavior and Personality

Openness

Those high in Openness may be more inclined to embrace intellectual risks. They are curious and open to novel experiences, which can lead to the pursuit of uncharted territories.

Conscientiousness

Conscientious individuals are typically riskaverse, valuing stability and order. They may be less likely to engage in financial or social risk-taking.

Extraversion

Extraverts tend to seek excitement and novel experiences. This trait may lead to more adventurous physical and social risk-taking behaviors.

Agreeableness

Agreeable individuals prioritize harmonious relationships and cooperation. They may be less prone to engage in confrontational or aggressive risk-taking.

Neuroticism

High levels of neuroticism may lead to impulsive risk-taking as individuals seek relief from anxiety and stress. For instance, someone high in neuroticism might turn to substance abuse as a way of coping.

Gender Differences in Risk-Taking

Research suggests that men and women often exhibit varying risk-taking tendencies. These differences are influenced by a combination of biological, social, and cultural factors. For instance,

men tend to engage in more physical risk-taking behaviors, such as extreme sports, while women may be more inclined to avoid such activities. Social expectations and cultural norms have played a significant role in shaping these differences. Men are often encouraged to exhibit more 'masculine' behaviors, which may include physical risk-taking, while women are expected to be more cautious. (Cross et al., 1997).

The Interplay between Risk-Taking and Psychological Well-being

The relationship between risk-taking behavior and psychological well-being is intricate. Risk-taking can have both positive and negative effects on an individual's mental health. Positive risktaking, such as pursuing career goals or engaging in adventurous hobbies, can enhance self-esteem and well-being. It can provide a sense of accomplishment and excitement. On the other hand, negative risktaking, driven by impulsive or addictive behavior, can have detrimental effects on mental health. Substance abuse, excessive gambling, and other risky behaviors can lead to addiction, anxiety, and depression. Finding a healthy balance between taking risks and maintaining psychological wellbeing is crucial. Strategies such as risk assessment, seeking support, and developing healthy coping mechanisms are essential in achieving this balance (Marlatt et al., 2005).

Risk-taking Behavior and Perceived Stress

Risky behavior might contribute to an increase in perceived stress. Risky behaviors, particularly those that result in poor results, can introduce additional pressures into a person's life, resulting to an increased experience of stress. (Lejuez et al., 2003)

Perceived Stress

Perceived stress is operationally defined as an individual's self-reported assessment of how tough, overwhelming, and demanding their life circumstances are. It includes the subjective assessment of stressors as well as the individual's ability to cope with these stresses, which reflects their overall perspective of stress-related situations. (Cohen et al., 1983).

Perceived Stress Impact on an Individual's Personality,

Perceived stress can have a significant impact on an individual's personality, as it can influence their thoughts, emotions, and behaviors in various ways. While personality is generally considered to be relatively stable over time, stress can still bring about changes and shape how a person expresses their inherent personality traits. Here's how perceived stress can affect personality

Emotional Changes

Perceived stress can lead to emotional changes such as increased anxiety, irritability, and mood swings. Individuals under high levels of stress may become more emotionally reactive, leading to alterations in their emotional expression and responsiveness. For example, someone who is typically calm and composed may become more agitated and quicker to anger when under stress.

Coping Strategies

Stress often prompts individuals to adopt different coping strategies. These strategies can vary from problem-solving and seeking social support to avoidance or emotional suppression. How a person copes with stress can affect their personality. For instance, someone who tends to be introverted might become more socially withdrawn when stressed.

Behavioral Changes

High levels of stress can lead to changes in behavior, such as increased risk-taking, changes in eating and sleeping patterns, and alterations in social interactions. These changes can impact the way a person presents themselves to others and, in turn, how they are perceived.

Cognitive Changes

Stress can affect cognitive functioning, leading to difficulties in decision-making, memory, and concentration. This can result in changes in how a person processes information and approaches tasks, which can influence their personality traits related to conscientiousness, openness, and intellect.

Physical Health

Chronic stress can lead to physical health issues, such as decreased energy levels and compromised immune function. These physical changes can influence personality traits related to vigor and vitality.

Long-Term Effects

Prolonged or chronic stress can potentially lead to more enduring changes in personality. For instance, an individual who is continually exposed to

high levels of stress may develop a more pessimistic or cynical outlook on life, affecting their personality traits related to optimism and agreeableness

As one of the most important psychological characteristics, perceived stress refers to the degree to which events in a person's life are viewed as stressful, unexpected, and uncontrollable (Cohen et al., 1983). It refers to a person's perspective or interpretation of the obligations imposed on them, as well as their ability to meet those demands. Perceived stress considers not only the real pressures in a person's life, but also their perception of the stressors, their ability to deal with them, and the emotional and physiological responses they have. Individual coping methods, resilience, social support, and personal beliefs all have an impact on it. Individuals' perceptions of stress might vary greatly depending on their cognitive assessments of stresses and their coping resources. Someone with a high perceived stress level may feel overwhelmed by even modest obstacles, whereas another person may cope with more major stressors more easily due to strong coping skills. Individuals' experiences of stress may differ significantly based on their cognitive assessments of stress and their coping resources. Someone with a high perceived stress level may feel overwhelmed by even minor challenges, whilst another individual may manage more readily with severe stresses due to good coping skills. To assess felt stress, several scales and questionnaires have been developed. The Perceived Stress Scale (PSS), established by Sheldon Cohen, Tom Kamarck, and Robin Mermelstein, is one well-known instrument. The PSS asks people to score the frequency and intensity of their stress feelings during the previous month, reflecting their overall perception of stress in various life scenarios (Cohen et al., 1983).

Anxiety disorders, depression, and other mood disorders have all been linked to high levels of perceived stress. Individuals who see their life as stressful on a regular basis are more prone to experience unpleasant emotional states and psychological distress (Cohen et al., 1983). Stress can cause physiological responses such as the release of stress hormones (e.g., cortisol), which, if chronic, can lead to changes in brain structure and function. This can enhance one's susceptibility to mental health illnesses. McEwen, B. S. (2007). Stress can trigger physiological responses such as the release of stress hormones (e.g., cortisol), which can lead to changes in brain structure and function if chronic.

This can increase one's susceptibility to mental health disorders. Folkman, S., & Lazarus, R. S. (1980). Some people are more resilient in the face of perceived stress, which can mitigate the harmful impact on mental health. Modifiers of the link between perceived stress and mental health outcomes include social support, personal qualities, and positive psychological resources (Ong et al., 2009).

Mindfulness, cognitive-behavioral therapy, relaxation techniques, and stress management programs have all had positive effects on mental health outcomes and overall well-being (Hofmann et al., 2010). Stress has repeatedly been connected to poor mental health outcomes. Kessler et al. (2005) investigated the link between perceived stress and mental diseases, finding that higher perceived stress is connected with an increased chance of developing mood and anxiety disorders. (Kessler et al., 2005).

Lupien et al. (2009) investigated the effect of perceived stress on the neurobiology of the brain. This study focuses on how prolonged perceived stress might cause structural and functional changes in brain areas associated with emotional regulation and stress response. Tamres et al. (2002) investigated the association between coping techniques and mental health outcomes in response to perceived stress in their study. According to the findings, the efficiency of coping techniques is critical in assessing the influence of perceived stress on mental health.

Interactions among Neuroticism, Risk-taking, and Perceived Stress

These constructs' interactions can be bidirectional. Individuals with high neuroticism, for example, may engage in risk-taking behaviors as a maladaptive strategy to cope with perceived stress. Risky actions, on the other hand, may intensify perceived stress in these persons due to potential negative repercussions (Asendorpf & Wilpers, 1998).

Significance of the Study

Neuroticism is a fundamental personality trait that relates to the tendency to experience negative emotions such as anxiety, despair, moodiness, and irritability. Individuals with strong neuroticism are more prone to perceive and react emotionally to ordinary occurrences Neuroticism in Pakistan has garnered increasing attention in recent years, with researchers conducting various studies to

better understand the prevalence and implications of this personality trait within the country's diverse and culturally rich context. It has been the subject of significant research in psychology, as it is associated with various aspects of mental well-being and can influence how individuals perceive and respond to life's challenges. The previous researches were mostly based on males and updated researches were on female in current research target the both male and females and investigate that how personality trait effect the decision making of individuals also to investigate that neurotic personality are same in the both genders or not. On the other hand, a personal level risk-taking can lead to personal growth and learning. Stepping out of one's comfort zone, taking on challenges, and confronting fears can lead to increased self-confidence and resilience.

Proposed Model

Neuroticism is a personality trait defined by a proclivity to experience negative emotions such as worry, melancholy, and irritation. The variables of the study include neuroticism, risk-taking behavior, and felt stress, with neuroticism serving as an independent variable and risk-taking behavior serving as a dependent variable, but experienced stress serving as a mediator. An individual with a neurotic trait will experience numerous emotions such as rage, irritation, and so on. A risk-taking behavior is the activity that a person is expected to perform in a certain situation. In the current study, researchers investigate how neurotic personality traits influence risk-taking decisions under stress. This is a qualitative study, with scales measuring neuroticism and risk-taking behavior in youth being utilized to evaluate the link between the variables.

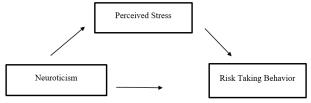


Figure 1. Proposed model of the research

Literature Review

Miller conducted research on neuroticism and affective instability in 2006. The primary goal of this research is to determine whether these two constructs are similar or dissimilar to one another. The sample size is 132 patients with general

personality features and specific impairments, particularly deficits in interpersonal functioning. Responses to structured and semi-structured interviews, self-reports of interpersonal issues, and reports of interpersonal problems from significant others were all included in the data. The LEAD (longitudinal, expert, all data) consensus approach was used to make clinical assessments of axis I and II symptoms and impairment. Neuroticism and affective instability manifested different concurrent relationships, with neuroticism strongly related to an anxious, avoidant personality style and affective instability strongly related to more externalizing personality styles. Neuroticism predicted subsequent symptoms, vocational impairment, and global dysfunction in the future, but affective instability predicted romantic dysfunction. According to the conclusion of this essay, neuroticism and affective instability are both essential components of personality illness but have different definition.

Anand (2016) conducted a study with the main goal of studying how perceived stress influences psychological wellbeing among Indian vouth. There are many problems that a student faces in their daily life, and these problems can cause stress and affect their psychological wellbeing. This study included 281 college students ranging in age from 18 to 24 from various regions of India, with 174 men and 107 women participating. They employed the perceived stress scale (PSS) to assess perceived stress, which consists of 14 questions with responses ranging from 0 to 4 for each item. They employ the Ryff's Scales of Psychological Well-Being for psychological well-being, which has a 6-point scale ranging from "strongly agree" to "strongly disagree." It contains 42 items divided into six subscales. According to the findings of this study, students who perceive their work load as threatening and stressful have a poor level of psychological health, and perceived stress was found to be adversely connected with psychological wellbeing.

Horiuchi (2018) conducted research, with the goal of predicting optimal human performance, with optimism being associated with improved affective well-being. Mediating elements include perceived stress, which in adaptation and stress reduction. Investigating the mediating effects of perceived stress on positivity's relationship with negative and positive emotion is crucial for stress management and well-being enhancement. They conducted an online poll in which 200 men and

women took part. The research budget decided the sample size. The Japanese Positivity Scale examined positivity through the use of eight items graded on a 5-point Likert scale, demonstrating reliability and validity. The Japanese Perceived Stress Scale assesses perceived stress in everyday situations, with higher scores indicating higher levels of stress. The Japanese Positive and Negative Affect Schedule uses 8 items ranging from 1 to 6 on a 6-point Likert scale to assess negative and positive affect. The first hypothesis was confirmed by mediation analysis, which revealed that perceived stress mediates the relationship between positivity and negative affect. The second hypothesis was confirmed by mediation analysis, which revealed significant indirect and total effects of positivity and positive affect, with perceived stress mediating the relationship.

Scorza (2015) conducted research with the primary goal of determining the relationship between bad childhood experiences and felt stress throughout early childhood. Childhood experiences make grownup situations more stressful and may damage mental health. It is a long-term study. The Boricua Youth Study monitored 1626 Puerto Rican children aged 5 to 13 years who lived in impoverished environments longitudinally from 2000 to 2017. In this study, ACEs were examined prospectively throughout childhood (18 years), and life stressors and prior year perceived stress were measured in early adulthood. The findings indicate that bad childhood effects perceived stress in early childhood, with increased life stressors acting as a moderator.

Rietschel (2014) conducted research, with the goal of investigating genetic and environmental factors in neuroticism, depressive symptoms, stress perception, common genetic influences, perceived stress as an independent heritable risk factor in twins. 798 teenage or young adult twins were included in the study as a sample. There were 139 monozygotic (MZ) and 241 dizygotic (DZ) twin pairs in the study, with female twin pairs predominating. With a 29-year-old twin, the average age was 15.5 years. For analysis, age was ztransformed. Age-appropriate questionnaires were used to assess perceived stress and neuroticism. Participants aged 12 to 14 years old completed the Perceived Stress Scale, while those aged 16 and up completed the Daily Life and Stressors Scale and the NEO-Five Factor Inventory. Somatic Psychological Health Report was used to assess depressive symptoms. The findings show that additive genetic effects explain 50% of the variance in perceived stress, neuroticism, and depressive symptoms, with strong genetic similarities. As a result, the conclusion contains Independent of neuroticism, there is genetic overlap between perceived stress and depression.

Kim (2016) conducted research, with the goal of examining the correlations between personality qualities and depressive symptoms via perceived stress, as well as the mediating functions of each factor in the relationship between gender and depressive symptoms. The study included 3,950 people aged 19 to 69, with no psychiatric or cancer histories, and focused on personality, stress, and depression measurements. The Center Epidemiologic Studies Depression Scale (CES-D) and a self-reported stress questionnaire were used to assess depression symptoms, and the Cronbach's alpha coefficients were 0.996 and respectively. Using the Revised NEO Personality Inventory (NEO-PI-R), neuroticism was added as a predictor variable for CES-D and stress score. Women had higher stress levels, higher sadness, neuroticism, openness to experience, agreeableness, and lower extraversion and conscientiousness than men. Among the conclusions are both stress and personality characteristics influence depressive symptoms, potentially modulating the link between gender and depression and improving understanding.

Sahi (2016) conducted research, and the current study's goal was to investigate personality in relation to resilience and stress. This study investigates perceived stress and stress symptoms, emphasizing the role of personality factors on stress responses and resilience. The sample included 100 college students (50 males and 50 girls) between the ages of 18 and 25. Demographic data from the individuals was also collected. To assess personality, resilience, perceived stress, and stress, the Eysenck Personality Questionnaire-R, Perceived Stress Scale, 14 Item Resilience Scale, RS-14, and Stress Symptom Rating Scale were employed. In the overall sample, there were positive relationships between stress symptoms, perceived stress, neuroticism, and psychoticism, with no significant gender differences psychoticism, neuroticism, extraversion, resilience, or perceived stress. Individuals with high Neuroticism and Psychoticism levels are more prone to stress and have lower resilience, necessitating interventional studies to instill resilience.

Nicholson (2005) conducted research with the first goal of testing relationships between the Risk-Taking Index and demographic variables, which revealed that men report more frequent risk taking than women, risk propensity is inversely related to age, and age effects are more pronounced for men than women. Another goal is to investigate the relationship between personality and risk behavior. The data presented were gathered from a diverse group of research participants. In the field and in class, the Risk-Taking Index was delivered with the NEO PIR personality questionnaire. A large NEO PIR personality database (N = 2700) has been compiled. The data included student and executive participants in various graduate courses, including MBAs, as well as executives participating in company specific training. A short, straightforward measure with strong face validity that asked about risk behaviors in numerous domains of life experience where most people would potentially be exposed to danger was devised to measure risk taking. The NEO PIR was used to assess personality. This is a 240item scale that generates 308item facet scales from a Liker type format, with 6 facets aggregating to offer Big Five personality factor scores. Men reported significantly higher risk taking than women in four areas, including the health and safety-oriented domains, as well as on the overall risk-taking scale. Women, on the other hand, took more chances in their careers and social lives. In every domain, risk-taking reduced with age. It was projected that high extraversion and openness scores would predict overall risk taking, while low neuroticism, agreeableness, and conscientiousness scores would not.

Paulus (2003) conducted research, and the study discovered that right anterior insula activation is greater during dangerous responses, influences the likelihood of selecting a safe answer, and is positively connected with harm avoidance and neuroticism. The Temperament and Character assessment (TCI) and the NEO personality assessment were utilized to assess the external validity of this technique. A total of 17 healthy, righthanded volunteers aged 38.3 years with no history of Axis I DSM-IV illnesses participated in the study. During functional magnetic resonance imaging, they Risky-Gains completed a decision-making challenge. In addition, the Temperament and Character Inventory (TCI) and the Neuroticism Extraversion Openness (NEO) Five Factor Inventory

were completed. The Risky-Gains assignment requires subjects to select one of three numbers (20, 40, or 80). There are 96 trials in total, with three trial types no punishment, 40 punishment, and 80 punishments. 17 respondents took personality questionnaires such as the TCI 125 and the NEO Five Factor Inventory. Subjects chose "safe" responses 46%-40% of the time, "risky" responses 26%-50% of the time, and "risky" responses 23%-50% of the time, with 4% failing to respond. Prior punishment altered response type significantly, with less 40 and 80 responses. In conclusion, our study discovered that activation of the right anterior insula modulates risky response selection, harm avoidance, and neuroticism, implying that insula activation is a critical neurological substrate.

Jia (2021) conducted research, with the goal of exploring the association between socioeconomic level and adolescent risk-taking behavior and uncovering its probable mechanism of action utilizing the PBT framework. A survey was conducted among adolescents aged 11 to 19 in northwest China. There were 1,280 surveys distributed, with 1,156 legitimate responses. The sample consisted of 554 boys and 602 girls, with a mean age of 15.51 years (standard deviation = 2.27). The Positive Psychological Capital Questionnaire and the Positive Self-Control Questionnaire were used in the study to assess socioeconomic level, subjective SES, psychological capital, and selfcontrol. Harman's test discovered 16 components, 17.61% of the variance was explained by the first factor, and the association between SES and risktaking behaviors was examined using Model 6 in the study. The conclusion incorporates psychological capital and self-control as moderating variables in teenagers' risk-taking behavior, emphasizing the importance of participation in improving external and internal resources

Ceccato (2016) conducted a study, with the goal of observing that stresses appear to have grown proportionally with the degree of political and economic uncertainty, and that more and more people are affected by it. Our key conclusion is that perceived chronic stress is strongly and robustly related to risky conduct. The research looks on decision-making under chronic stress and cortisol exposure. The University of Heidelberg experiment involves anonymous participants in class and the laboratory, with payment set by drawing balls, transparency, and the giving of a hair sample. A

visual analog scale ranging from 0 to 10 was used to assess self-reported risk taking. The entire sample size was 205 young adults aged 18 to 33, with 57% being women and 43% being men. There were 195 observations in all, with 51% giving. The German TICS questionnaire, which evaluates nine subscales and 57 questions, was used in the study to assess chronic stress. Hair cortisol levels were measured using an immunoassay, and the average weight per hair segment was 7.5 0.5 mg. SPSS statistical analysis, correlations, and robustness. The study investigates the relationship between perceived stress and choices in uncertain circumstances, discovering a substantial positive link between risk taking and TICS sum score. Measures of risk-taking reveal differences in general risk attitude, behavioral reaction task, and perceived chronic stress levels. Cortisol accumulation in hair is likewise connected to risk-taking and perceived chronic stress, but not to risk-taking decisions or perceived chronic stress. According to data, women take fewer risks than males, with men investing more in risky options and women investing less.

Reynolds (2013)) conducted research, and the current study sought to analyze the intricate relationship between risk-taking and social anxiety in a group of healthy adolescents. This study is based on a complex body of literature that has vielded contradictory results on risky behavior and social anxiety. A total of 34 adolescents aged 15-18 from Washington, D.C., participated in a stress management research experiment. The sample was diverse, with 67.6% females and people of various races included. PANAS negative affect items were used to assess stress levels. The SPAI-23 is a 23-item scale that assesses social phobias and anxiety. The study included 18-year-old volunteers in two sessions, each with either a low or high stress level. In either scenario, participants rode BART, received stress evaluations, and delivered speeches. The SA group had no demographic differences, no relationships with changes in BART scores, and no session completion order. The study investigates the association between social anxiety and risk behavior, demonstrating that persons with high social anxiety engage in more risk-taking behavior under high stress settings, whereas those with low anxiety do not tendencies across 150 trials, concentrating on task type, content, and age. PsycLIT and PsycINFO databases were searched for studies on gender variations in risk-taking. Concerns with risk-taking

assessment, the impossibility of uncontested validity, inclusion criteria, and outcomes effect are underlined by four difficulties. Only 49 papers compare risktaking measures between men and women; the rest are policy-oriented perspectives, separate analyses, risk perceptions, and illness risk factors. The findings revealed significant gender differences in risk-taking behaviors across 16 categories, with 14 of the 16 types having larger effects in male individuals. The gender difference fluctuated among age groups and appeared to be closing with time. According to Byrnes (1998), developmental gains in risk taking are caused by children's increased risk-taking in novel situations, which necessitates self-regulation and self-correction mechanisms. Gender inequalities might occur as a result of differences in expectations and values. Our findings definitely support the notion that male participants are more prone than female participants to take risks.

Jam (2012) conducted research with the goal of determining the mechanism by which neurotic persons are associated with job stress and intent to leave. The study investigates the relationship between neuroticism and job stress as perceived by organizational politics (POP). Also, neurotic persons have a bad personality and tend to have unfavorable experiences in their lives. The study's sample included personnel from 12 Pakistani private and public sector firms. There were 300 surveys distributed, with 245 returned. The response rate was 71%, with ratings ranging from strongly disagree to strongly agree on a 5-point Likert scale. Neuroticism was measured using 44 BFI questions, with high scores suggesting neurotic personality traits and high reliability, while other scales were used to examine POP, job stress, and intent to leave. The results demonstrate a significant positive association between POP and turn-over intention. The major effect hypothesis is supported by correlation analysis. The results for job stress suggested that POP was positively connected to job stress, and the hypothesis was tested using the mediated multiple regression (MMR) technique. Identifying the mechanism/process (POP) through which neurotic personality outcomes are related was a critical component of this investigation.

Amir (2010) conducted research with the goal of investigating anxiety and depression among medical students at Egypt's Mansoura Medical School, concentrating on risk variables and their impact. Students were chosen using a stratified

cluster sampling procedure. A questionnaire was completed by 366 students in clusters, with an 85.0% response rate. 164 (52.7%) were men, 147 (47.3%) were women, 3 students declined to participate, and 16 were absent. The HAD scale was used to assess anxiety and depressive symptoms, whereas the PSS was used to assess stress. SPSS (Statistical Package for Social Sciences) version 11 was used to examine the data. According to the findings, the factors that predicted sadness included sex, felt stress, and pleasure with early maternal interactions. Anxiety levels were 8.1 3.3 and 9.9 3.1, respectively, with anxiety levels, stressors, chronic health problems, and early relationship ratings independently linked with depression. The conclusion includes significant rates of sadness and anxiety among medical students, necessitating nationwide longitudinal investigations.

In 2023, Joneghani conducted research with the goal of examining the association between neuroticism and death fear in women aged 25-50 during the COVID-19 pandemic, as well as the role of perceived stress as a mediator. The study comprised 130 women aged 25 to 50 who were asked about their winter experiences. The Death Anxiety Scale of 15 questionnaire items was used to assess individuals' attitudes toward death. The BFI Five Factor Scale has 44 questions to assess (1) extraversion, (2) adaptability, (3) conscientiousness, (4) neuroticism, and (5) openness, while the Perceived Stress Scale PSS has 14 questions to assess their stress level. The study found that neuroticism has a significant partial mediation rate on perceived stress-mediated death dread. Perceived stress had a direct impact on death anxiety, with significant effects of 0.195, 0.305, and 0.407, respectively. The study that discovered that higher neuroticism leads to increased death anxiety in women is included in the conclusion. This effect is exacerbated by perceived stress. Understanding mechanisms can help women reduce neuroticism and death fright.

Shehzad (2020) conducted research, with the study aiming to uncover Big-5 personality qualities among KP medical and dental students, with a focus on well-known personality traits. A random selection procedure was employed to pick 2000 medical and dental students. Based on the five-factor model, the (BFI-10) was used to assess personality qualities such as Extraversion, Agreeableness, Conscientiousness, Neuroticism, and Openness to Experience. SPSS version 26.0 was used to record and analyze the data. When compared to medical

students, undergraduate dental students scored higher in agreeableness and neuroticism. This shows that personality development programs for both medical and dental students are required in KP. Neuroticism, agreeableness, and extraversion are common among KP medical and dentistry students, necessitating regular psychiatric therapy.

In 2022, Rani conducted research with the of examining the interaction between neuroticism, anxious self-esteem, self-appraisal, and psycho-social stressors in university students, with a focus on the mediating function of anxious selfesteem and self-appraisal. Trauma is defined as upsetting occurrences that have an impact on one's mental health and functionality. The study uses a purposive selection strategy to choose 18-26-yearold young adults from various universities, concentrating on gender, family system, and trauma experience using the Trauma Event Checklist. Five scales were used the Life Event Checklist (LEC) contains 17 items, the Anxious/Withdrawn Selfesteem Scale has 12 items, Neuroticism vs. Emotional Stability Scale has 8 items, and the Psychosocial Stressors of Trauma Scale has 8 things. The Scale was created to investigate the PSST in young people and consists of 45 items, whereas the Self-Appraisal was created to investigate cultural meanings and consists of 8 items. Instruments used to collect data from 322 participants included demographic performance, the Trauma Event Checklist, Psychosocial Stressors of Trauma, the Trauma Appraisal Scale, the Self-Esteem Scale, and the Big Five Inventory. The findings demonstrate that neuroticism, anxious self-esteem, PSST, and self-appraisal all have favorable relationships. Trauma, anxiety, and self-esteem Self-assessment partially mediates the neuroticism-psychosocial stressor connection, lowering the direct influence but preserving a large c' route. Conclusion Neurotic personality qualities in young adults worsen mental health problems

Kotov et al., 2010 published a meta-analysis that showed persuasive evidence of a significant relationship between neuroticism and various mental diseases. Higher degrees of neuroticism were consistently connected to an elevated risk and prevalence of anxiety disorders, depressive disorders, and substance use disorders, according to the study. The meta-analysis also showed the trait's ability to predict who would be more vulnerable to certain illnesses. This collection of research

emphasized neuroticism's clinical importance as a potential marker for determining susceptibility to a variety of mental health disorders. As a result, the study stressed the necessity of taking neuroticism into account in clinical practice and research, with the goal of improving diagnostic accuracy and informing tailored treatment approaches.

The longitudinal study conducted by Roberts and Del Vecchio in 2000 offered evidence supporting neuroticism's stability across the lifespan. The study discovered that neuroticism had a high degree of rank-order consistency across time, indicating that those who scored high or low on neuroticism tended to keep those scores throughout their lives. This consistency was shown from childhood to old age, indicating that neuroticism is a relatively stable personality feature. The findings supported the idea that neuroticism is a trait with inherent stability, which contributes to its function in affecting emotional experiences and actions over the lifespan.

According to the transactional theory of stress (Lazarus & Folkman, 1987), our findings show that stress perceptions vary depending on individuals' personalities and the interplay of their personalities with COVID-19-related stresses. Individuals with higher levels of neuroticism reported higher levels of perceived stress at the trait level. Although extraversion was unrelated to stress at the trait level, distinct patterns developed at the facet level. Those who scored high on sociability were more likely to report higher perceived stress regardless of the COVID-19-related stressors they encountered, whereas those who scored high on assertiveness and low on activity interacted with COVID-19-related stressors to buffer stress perceptions. Importantly, our findings indicate that when attempting to understand the stress process in specific settings, it may be especially important to examine not only broad personality traits, but the precise components of which they are comprised.

Neuroticism is a personality attribute that defines the general tendency to have negative affect. Studies exploring the links between a leader's neuroticism and abusive supervision or laissez-faire leadership, on the other hand, yield varying results, with relationships ranging from strong too small or non-significant (Eissa & Lester, 2017). A possible explanation for the contradictory results is that different facets within a trait, such as neuroticism, can have opposite effects in some cases; thus, a low

score on one facet can be balanced by a high score on another, resulting in a mean that does not reflect the true variation within the trait (Kant et al., 2013).

The purpose of this study was to look at how social support, self-regulation, and personality factors contributed to the variation in depression symptoms among college students. According to the findings, pupils who scored higher on neuroticism reported more depressed symptoms. This agrees with previous findings (Roelofs, 2008). In the final model, we also discovered that both autonomous and managed self-regulation were significant predictors of depressive symptoms among college students. According to the findings, autonomous selfregulation (studying a subject because one values and enjoys it) is associated with lower levels of depressive symptoms, whereas controlled selfregulation (studying because one feels pressured or forced to do so) is associated with higher levels of depressive symptoms. The findings were similar with previous study, which found that autonomous self-regulation was connected with greater psychological well-being enhancement (Nix et al., 1999). Controlled sorts of self-regulation, on the other hand, enhance people's vulnerability to depression (McBride et al., 2010). Furthermore, the findings of this study offered significant evidence that positive interactions with others among college students were related with a lower incidence of depressive symptoms.

Consistent with previous findings, the results of this study also found that social Connectedness or positive relationships with close peers was associated with improving One's psychological well-being (Lynch, 2013) However, recent research has shown that a latent vector can be extracted from neuroticism (a trait) and the acute phenomena (symptomatology of severe depression), which includes depression severity and anxiety, as well as suicidal thoughts (SI) and attempts (SA) (Jirakran et al., 2023) This implies that neuroticism is a subclinical manifestation of the major depressive illness phenomena (Jirakran et al., 2023) Nonetheless, no research has been conducted to determine if ruminating may mediate the effects of neuroticism on the phenomena of depression, such as suicidal behavior and sleep disturbances, or whether rumination is a component of the phenomena of depression.

Previous research has found that high neurotic people react more strongly to stressful

circumstances and frequently engage in maladaptive coping mechanisms (Hisler et al., 2020).

Neuroticism is a well-known personality trait that is characterized by persistent negative affect (Costa et al., 2007), a general tendency to respond more sensitively to negative stimuli, and a proclivity toward anxiety.

The intensity and sensitivity of unpleasant emotions have repeatedly been linked to neuroticism. During four years of 30-day diary investigations, for example, higher neuroticism predicted both greater average daily negative affect and greater emotional reactivity to stressors (Howland, 2017).

Many research has looked at the relationships between neuroticism and the average, variability, and reactivity of positive and negative affect, but few have looked at the interdependence of these affective qualities when looking at their relationships with neuroticism. Wendt and colleagues (2020) discovered that neuroticism was specifically associated with variability in negative affect, but not in positive affect, after statistically adjusting for mean values. Using sophisticated multilevel methods (i.e., location-scale modeling) that explicitly models the relationship between mean and variability,

Geukes and colleagues (2017) discovered that higher neuroticism scores predicted both higher mean levels and negative affect variability. Another study found that greater neuroticism predicted both feeling more different types of negative emotions during the day and more variability in the daily number of different types of negative emotions over time in 790 participants who completed two assessments ten years apart (Liu et al.,2018). However, more neuroticism predicted less fluctuation in the daily number of different types of negative feelings participants felt over time during the second examination ten years later.

According to another study, neuroticism is similarly related to the overall degree of variability in negative affect throughout time. Lower emotional stability (i.e., strong neuroticism) predicted both lower mean scores and greater variability in unpleasant emotional states among nearly 500 U.S. participants reporting over 20,000 days (Fleeson & Gallagher, 2009). This relationship pattern has been repeated in the United States, as well as Japan, China, and the Philippines (Ching et al., 2014).

Individual differences in the capacity to experience and express severe and persisting

negative emotions are referred to as neuroticism. When compared to people with low neuroticism, people with high neuroticism are more adversely reactive and prone to unpleasant feelings. Neuroticism is largely stable, although it is also malleable. There is evidence that neuroticism evolves throughout time. Given that neuroticism is a strong risk factor for psychopathology. (Michelini et al., 2020) as well as negative physical health outcomes (Puterman et al., 2020) and economic strain, investigating neuroticism-modifying factors is both theoretical and practical.

Early electrophysiological studies on the biological basis of neuroticism (Eysenck, 1967) and recent neuroimaging studies (Ormel et al, 2013) have investigated emotional reactivity and emotion regulation, and proposed a dysfunctional system of limbic and frontal brain regions to underpin the aforementioned difficulties in high neurotic individuals. Indeed, recent structural and functional connectivity investigations have shown that neuroticism is associated with changes in limbic-frontal circuitry, potentially jeopardizing top-down control mechanisms (Bjrnebekk et al, 2013).

The current study sought to evaluate changes in functional network organization related with neuroticism. Based on previous structural connectivity studies that reported widespread decreases in white-matter integrity across multiple fiber tracts interconnecting different parts of the brain, findings supported the hypothesis of altered functional connectivity between brain regions in relation to neuroticism. We discovered that the functional network structure of people with greater levels of neuroticism is less ideal in terms of effective information processing and has weaker functional connections. Furthermore, we found subnetworks related to emotion and salience processing play a more prominent role in network organization in high neurotic individuals, whereas subnetworks related to sensory(-motor) functions and cognitive control play a less prominent role (Doucet et al, 2011). This is consistent with prior research showing that those with greater degrees of neuroticism struggle with adaptive emotion regulation (Yoon et al, 2013).

The current study sought to evaluate the relationship between neuroticism and brain activation in the UG during the perception of social norm breaches and social decision-making, specifically in reaction to unfair offers. In a sample

of 120 women chosen based on their neuroticism score, we used an altered version of the UG (Sanfey et al., 2003). Only women were included since they had greater neuroticism scores than men and are more likely to suffer affective disorders (Parker & Brotchie, 2010). Furthermore, research on gender differences in neuroticism is very sparse. In reaction to unfair offers, both high and low neurotic persons engage brain regions signaling social norm violations, according to the findings. When it comes to decision-making, however, it appears that brain circuitry connected to reward and motivation is altered in persons with higher neuroticism when they accept an unfair offer.

Derefinko et al. (2014) investigate the complex relationships between impulsivity and risky sexual behavior in young males. The study found that impulsivity, both as a personality trait and as observable behavior, can have a considerable influence on risky conduct, such as harmful sexual practices. The study gives a more sophisticated view of how individual attributes combine with physiological responses to generate risky behavior by looking into physiological arousal as a potential mediator. This highlights how psychological factors interact with biological reactions to shape behaviors, stressing the complexities of dangerous behaviors and their psychological roots.

Cooper et al. (2017) evaluated the impact of risky behaviors on psychological well-being, such as excessive alcohol drinking and drug use. Their findings indicated that these practices were linked to higher levels of psychological discomfort and lower overall well-being over time.

Method Study Design

A cross sectional research design was used in the research that focuses on neurotic tendencies and risk-taking behavior among adults. The cross-sectional study design is a survey research design in which the researcher at one time takes one or more sections from one population for collecting survey from them and compare them with each other to find difference between their characteristics.

Objectives

1. To investigate the relationship between neuroticism and risk-taking behavior and perceived stress among adults.

- 2. To examine the mean differences in male and females for neuroticism among adults.
- 3. To investigate the mediating role of perceived stress over neuroticism and risk-taking behavior among adults.

Hypotheses

- 1. There will be a positive relationship between neuroticism and risk-taking behavior in adults
- 2. Neuroticism will have positive relationship with perceived stress among adults
- 3. There will be a positive relation between risk taking and perceived stress.
- 4. There will be a difference in neuroticism among males and females
- 5. Perceived stress will have mediating role over neuroticism and risk-taking behavior stress among adults.

Sample

The sample consists of 250 participants from universities both male 48% and female 52% respectively. The age group of the participants be 18-25 years or above with 90% single or 9.6% married social status. Also, the participants with different education of intermediate 1.2%, undergraduate 72% and post graduate are 26.8% with different residential area of urban 30.8% and 69.2% rural were included in the study. The purposive sampling was used for collection of samples. Purposive sampling is a type of non-probability sampling in which the researcher randomly by purpose select the sample and collect data from it, from different universities.

Inclusion Criteria

Inclusive criteria were including the students from different universities with the age range of 18- 25 years or above, both male and females and whose maximum social status was single and the participants who are familiar with this study was included to avoid biasness.

Exclusion criteria

The exclusive criteria were including the participant who are above 30 years as previous researches the sample collected mostly from the young adults and married couples.

Research Instruments Perceived Stress Scale

The Perceived Stress Scale (PSS) is a classic stress assessment instrument. The tool, while originally developed in 1983, remains a popular

choice for helping us understand how different situations affect our feelings and our perceived stress. This is a 10-items scale with 0-4 scoring where 0 means never and 4 means very often. Individual scores on the PSS can range from 0 to 40 with higher scores indicating higher perceived stress. Scores ranging from 0-13 would be considered low stress. Scores ranging from 14-26 would be considered moderate stress. Scores ranging from 27-40 would be considered high perceived stress.

Neuroticism

For the measurement of neuroticism, The Five Factor Model breaks personality down into five components Agreeableness, Conscientiousness, Extraversion, Openness, and neuroticism. This is a 44 items scale which is a 5-point scale where 1 refers to strongly disagree and 5 refers to strongly agree. All these items based on the five personality or subscales. This scale is given by Goldberg in 1993

Risk-taking Behavior

The adolescent risk-taking behavior questionnaire is use to measure the risk-taking behaviors among youth in various domains. This is 22 items scale with 4-point scale ranging from 0-4 where 0 means never and 4 means very often.

Procedure

The sample consists of the participants (university students) with an age range of 18-25 years or above from random departments of universities who have no prior knowledge about this research. The data collected quantitatively by using scales of perceived stress, big five personality inventory and adolescent risk-taking behaviors. Participants were informed about the research with an assurance that their information remain confidential and their data was used only for research purposes. The consent of the participants was taken and it's requested to read and respond carefully and honestly.

Analysis

The analysis of this study was run on SPSS (statistical package for social sciences) analysis. Regression analysis, correlational analysis, Mediating Role and difference. To find relationship of neurotic trait and risk taking, neuroticism and perceived stress and risk-taking behavior and perceived stress we use correlational analysis. To find the Mean difference in male and females in neuroticism we use t-test analysis. To investigate the mediating role of perceived stress over neuroticism and risk-taking we use macro process.

Data Cleaning and Dealing with Missing Values

A data set of 260 cases was screened out for identification of multivariate and univariate outliers and to ensure the accuracy of the data set. To begin, when the cases that were evaluated it the entry level were examined, it was discovered that 4% of the, Cells had incorrect data as a result of typographical errors. After ensuring the correctness of data, boxplots were investigated for the goal of confirming the existence of univariate outliers. There was a total of ten individuals that exhibited outlying behavior and were consequently excluded from the study. In the end, the data set consisted of 250 participants who had been examined in every possible way and were prepared for the conclusive analysis.

Results Demographic Variables

The frequency and percentage of demographic variables including gender, education, age, social status, residential area, was calculated. The demographic characteristics of the sample are given in below table;

Table 1 Demographic characteristics of sample (N=314)

Variables	f	%
Age		
nal of Contemporar 18-21	80	32.0%
22-25	147	58.8%
Above 25	23	9.2%
Gender		
Male	120	48%
Female	130	52%
Social status		
Single	225	90.0%
Married	24	9.6%
Education		
Intermediate	3	1.2%
Undergraduate	180	72%
Masters	67	26.8%
Residential area		
Rural	77	30.8%
Urban	173	69.2%

Note. F= Frequency, %= Percentage

Table 1 indicates the sample characteristics of sample. Frequencies and percentage of age, gender, social status, education and residential area, was calculated. 32% of the participants are in the age of 18-21 years, 58.8% are of 22-25 years and 9.2% are above 25 years. Among the participants 48% are male and 52% are females. The social status of 90%

are single and rest of 10% are married. The education of the participants is 1.2% are of intermediate, 72% were in undergraduate and rest of the 26% were in masters. The residential areas of the participants the 30.8% were from rural areas and rest of 69.2% were from urban area.

Table 2
Psychometric Properties of Scale

Variable	K	M	SD	α	R
NEU	8	23.41	5.53	.751	10-37
RTB	22	17.92	10.99	.717	.00-46
PSS	10	21.32	7.955	.813	5-40

Note. NEU=neuroticism, RTB= risk taking behaviors, PSS= perceived stress scale, K=no. of items, M= means, SD= standard deviation, α =reliability coefficient, R indicates the range.

Table 2 shows the mean, standard deviation, and reliability measured by Cronbach's alpha for the research instruments and corresponding scales used in the current study. The above-mentioned table shows that all of the subscale's reliability fall within normal ranges.

Relationship between the Variables

Table 3

Correlational matrix of study variables (N=250)

	Variables	1	2	3
1.	RTBB	-	.154*	.206**
2.	PSS	-	-	.331**
3.	NEU	-	-	-

Note. NEU= big five neuroticism, RTB= risk taking behaviors, PSS= perceived stress scale, **p<.01, *p<.05.

Table 3 indicates that neuroticism was significantly positively related to risk taking behavior (r=.154, p<.05) and perceived stress (r=.206, p<.01). Risk taking behavior is significantly positively related to perceived stress (r=.331, p<.01) Table 4

Perceived stress as a mediator between neuroticism and risk-taking behavior (N=250)

Mediator				
		Effect	\mathbb{R}^2	F
	Total B	.4263	.0425	30.58
Perceived stress	Direct B	.3607	.0507	6.59
	Indirect B	.0657		
		95%Cl=(.0156		
		.1878)		

Note. R^2 = R square, ***p<.000

Table 4 showed that mediating effect of perceived stress between neuroticism and risk-taking behavior

results revealed that neuroticism significantly positively predicted perceived stress (β =.1856, p<.05). both neuroticism and perceived stress significant positively predicted the risk-taking behavior (β =-.1712 p<.05) among university students while indirect effect shows that perceived stress is not mediating the relationship of neuroticism with risk taking behavior. (β indirect = -.0631, 95% Cl= -.0156, -.1878)

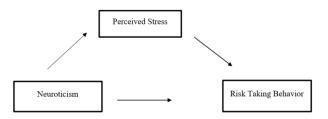


Figure 2. Shows there is no mediation effect of perceived stress over neuroticism and risk-taking behavior.

Table 5 *Mean, standard deviation, t-test statistics of study variables* (N=250)

variables (11–230)							
Men			Women		t(df)	p	Cohens d
nal of Conte	M	SD	М	SD			
NEU	20.14	6.023	23.58	5.460	2.28(247)	.023	12.9%

Note. NEU = big five inventory, M=mean, SD=standard deviation, p=significance value, Cohen's d= effect size.

Table 5 indicates that there was a significant positive gender difference in neuroticism t (247) =-2.28, p<0.05. Females (M=23.58, SD=5.46) has high level of neuroticism than males (M=20.14, SD=6.023).

Discussion

The purpose of this study was to explore the role neuroticism and perceived stress in predicting risk taking behaviors. The research was designed to get an understanding that how neurotic personality trait effect the decision making or risk-taking behaviors of individual and how perceived stress plays a role in taking decisions of neurotic personality. For this purpose, self-report measures were used specifically, the perceives stress scale (PSS) was used for the purpose of measuring the stress, Big five inventory (BFI) was used to measure

the neuroticism and the adolescent risk-taking questionnaire (ARTQ) was used for the purpose of measuring risk taking behaviors.

The research was conducted on a sample size of 250 young adults' males and females, and SPSS-23 was used for the analysis. The psychometric properties of each of the scales were assessed. The alpha coefficient for each of the scales were computed. The reliability of Neuroticism (α = .751), PSS (α = .717) and ARTQ (α = .813) respectively. The α -coefficient for all the variables was more than .7 that is a good value. Because all coefficient values are within acceptable bounds, we can conclude that the results of the relevant scales are reliable.

The frequency and percentages for age, gender, social status, education, residential area, and socio-economic status was calculated. Findings illustrate that 32% of the participants are in the age of 18-21 years, 58.8% are of 22-25 years and 9.2% are above 25 years. Among the participants 48% are male and 52% are females. The social status of 90% are single and rest of 9.6% are married and .4% were divorced. The education of the participants is 1.2% are of intermediate, 72% were in undergraduate and rest of the 26% were in masters. The residential areas of the participants the 30.8% were from rural areas and rest of 69.2% were from urban area. The study variable means and standard deviations were calculated. Findings indicate that our data is normally distributed because the value of skewness was within an acceptable range.

The objective no. 1 of the current study was to examine how neuroticism effects the risk-taking behavior. The current study investigates the relationship between neuroticism and risk-taking behavior among students Neuroticism, often known as emotional instability, is concerned with an individual's emotional resilience and stability. Neurotic people have more frequent and severe negative feelings, such as worry and mood swings. Low neuroticism suggests emotional stability and a relaxed disposition. Neuroticism is defined as items referring to irritability, anger, melancholy, anxiety, self-consciousness, worry, hostility, vulnerability that have been found to be significantly linked with one another in factor analyses (Goldberg, 1993).

Risk-averse and impulsive risk-taking behaviors are common in neurotic people. On the one hand, their increased worry and fearfulness may cause individuals to avoid risky circumstances in

order to avoid unpleasant results. Some neurotic people, on the other hand, may engage in impulsive acts to cope with their unpleasant feelings (Strathman et al., 1994). Anxiety, angry anger, melancholy, self-consciousness, impulsiveness, and vulnerability are all scales that measure different aspects of neuroticism. Neuroticism refers to a set of emotional and behavioral inclinations. Individuals with high levels of neuroticism are more prone to worry, anxiety, tension, and mood swings. They frequently have strong reactions to perceived dangers or challenges and may struggle to cope with pressures. Mood instability, on the other hand, is associated with impulsivity and risk taking and it is generally accepted that mood swings trigger impulsive behavioral responses. Based on the notion that anxiety generally promotes risk aversion but also acknowledging that anxious individuals might still act impulsively or take risks if they also experience prominent mood instability. The study claimed that mood instability would be positively associated with impulsivity and risk taking and the present study also hypnotized that the neuroticism and risk-taking behaviors have significant positive relationship with each other. The findings or results shows that person with high neurotic personalities have higher level of risky behaviors and neuroticism is positively associated with the risk-taking behaviors. These findings are also consistent with previous literature that suggested Eysenckian neuroticism and that mood/emotional instability is the main component that is positively associated with trait impulsivity and risk taking (Peters et al., 2020). In fact, there was a correlation between neuroticism and risk-taking behaviors, which was positive and also statistically significant.

The other objective no. 2 of the current study was to examine how neuroticism effects the perceived stress. The current study investigates the relationship between neuroticism and perceived stress among adults.

Neuroticism, a personality trait characterized by enhanced negative emotional reactivity, is frequently linked to higher levels of perceived stress. Individuals with strong neuroticism regard everyday events as more stressful and suffer more emotional anguish even in less stressful settings. (Carver, Scheier, & Weintraub, 1989). Stress is a person's adaptability to dangers that are either internal or external (Lecic-Tosevski et al., 2011). A person's perception of stress is influenced

by their assessment of a stressor's level of threat or lack thereof, as well as their own coping mechanisms (such as their perceived effectiveness or resources to deal with the threat). Personality is one of the variables that can affect how we perceive and react to stress. Based on the Five-Factor Model, there are five broad personality qualities, including neuroticism (example propensity to be emotionally unstable and experience such feelings as anxiety, worry, and fear). Other certain personality qualities, such as neuroticism, conscientiousness, and extroversion, show particularly strong relationships with perceived stress (Afshar et al., 2015). Specifically, those with higher neuroticism levels tend to experience greater levels of perceived stress individuals with higher levels conscientiousness and extroversion (Tosevski et al., 2011). The current study hypothesizes that there is a significant positive relation between neuroticism and perceived stress. The findings shows that there is a significant positive relationship between perceived stress and neuroticism, the person with high level of neuroticism experiences high stress and negative emotions. These findings are also consistent with previous literature that suggested individuals with higher neuroticism experienced higher levels of stress due to higher levels of perceived threat and lower levels of efficacy also that personality traits could be an important factor in identifying stressprone individuals (Liu et al., 2021).

The objective no. 3 of the current study was to examine how the perceived stress effects the risk-taking behavior. The current study investigates the relationship between perceived stress and risk-taking behaviors among youth.

Risk-taking behavior is acting or behaving in ways that have the potential to result in negative outcomes and consequences, frequently involving uncertainty or potential harm." Smith and colleagues (2018). Individuals that engage in risk-taking behavior are more likely to engage in acts or decisions that have the potential for undesirable consequences or outcomes. Individuals who engage in risk-taking may be driven by possible benefits, excitement, curiosity, or peer influence, despite the fact that these actions frequently include a level of uncertainty and the threat of harm or loss. The relationship between mental health and risky conduct is complicated, with mental health disorders frequently impacting an individual's proclivity to participate in acts with potentially bad results.

Depression, anxiety, and substance use disorders can affect judgment and decision-making, leading to risky behavior owing to a lack of regard for consequences. Furthermore, some people may resort to dangerous activities as coping techniques for emotional discomfort, thus increasing their mental health problems. Substance misuse may be used as a kind of self-medication, which can lead to addiction. Physical health is one of the most serious repercussions of dangerous activity. Substance misuse, irresponsible driving, and unprotected sex can all result in accidents, injuries, and long-term health problems (Hawkins & Catalano, 2002). Risky behavior might contribute to an increase in perceived stress. Risky behaviors, particularly those that result in poor results, can introduce additional pressures into a person's life, resulting to an increased experience of stress (Lejuez et al., 2003). The current study hypothesized that person who are experiencing greater level of stress have greater tendencies to involve in risky behaviors like substance use, alcohol consumptions, high speeding, unprotected sex etc. the findings show that the perceived stress have a significant positive relationship with the risk-taking behaviors as person experiencing higher level of risk involve in risky behaviors. These findings are also consistent with previous literature that suggested participants who completed the study during the initial weeks of the COVID-19 pandemic in the U.S. reported higher levels of mood disorder symptoms, perceived stress, and alcohol misuse as compared to those who completed the study prior to the pandemic. As pandemic is the stressful situation for individual throughout the world. Therefore, the individual who go through with the stressful situation are more vulnerable to alcohol consumption (Charles et al., 2021).

In addition to the objective no. 4 is investigate the mean differences in male and females of neuroticism. The study hypothesized that there is significant difference between females and males as female's rate high score in neuroticism than males and findings show that females have high level of neurotic trait than male. The recent previous studies only focus on the females in relation to neurotic personality. The current study targeted the both gender and the neurotic trait is high in females than in male (Joneghani et al., 2023).

In addition to that, one of the objectives which was objective no. 5 of this study was examine the mediating role of perceived stress over

neuroticism and risk-taking behaviors. Making judgements while under extreme stress is a necessary aspect of everyday life. In the literature, stress has primarily been linked to detrimental effects on decision-making, such as riskier behavior and more unfavorable decisions. (Putman et al., 2010). However, there doesn't seem to be agreement on how acute stress affects making risky decisions. Researchers have found that stress can make people more likely to take risks. Higher neuroticism has been found to be associated with poorer decisionmaking performance in plenty decision situations, such as fair and unfair offers (Servaas et al., 2015). The current study hypothesized that there is a mediating effect of perceived stress over neuroticism and risk-taking behaviors and in current study hypothesis was rejected however the findings shows that there is no mediating effect of perceived stress over risk taking behavior and neuroticism as perceived stress shows separate effects on both the variables neuroticism and risk taking but doesn't show the total effect on both the variables (Zhu et al., 2023).

Conclusion

The current study aims to explore the role of neuroticism and perceived stress over risk taking behaviors among adults and predicting the role of perceives stress as a mediator the findings of the current study were in line with the findings of previous research, which found that the neuroticism is significantly related to the perceived stress and risk-taking behavior. The results also shows that there is a significant difference in male and female as female rates high score in neuroticism than male. The results also illustrates that there is no mediating effect of perceived stress over neurotic and risk-taking behaviors.

Limitations

The current studies have following limitations

- Emphasize that this research findings may be specific to the population or context you studied and might not be applicable to all situations or cultures.
- If the measurement of perceived stress was self-reported in the participants, it may not fully capture the complex nature of stress and may be influenced by individual perceptions.

- Neuroticism is a multifaceted trait, and this research may not have considered all its facets, potentially leading to an oversimplification of this trait.
- In previous studies neuroticism in males has been studied in older researches and updated researches mostly females' sample was used which is the reason for references of older researches
- The participants showed non serious attitude and somehow hide their original views or interests, the use of self-report surveys may introduce response bias and social desirability bias, affecting the accuracy of the data collected.
- Participants were really concerned about their personal identity and susceptible to recall bias especially if participants are asked to report past risk-taking behaviors or stress experiences.

Recommendations

The current study has following recommendations for future researchers

- Try to explore different populations or using longitudinal research designs to gain a more comprehensive understanding for neurotic personality. Future researchers should conduct longitudinal studies to track changes in neuroticism, perceived stress, and risk-taking behavior over time. This can provide insights into the dynamics of these factors
- Small or homogenous samples may limit the generalizability of your findings. Try to do research in different population or geographical regions
- BFI is not recommended as it covers five facets of personality trait, use neurotic inventory for better results about personality.
- Recommend cross-cultural studies to examine how these relationships may vary in different cultural contexts, considering that cultural factors can influence behavior and stress perception.
- It is suggested to employ mixed-methods research approaches that combine quantitative surveys with qualitative interviews or observations to gain a Deeper understanding of different personalities.

Implications

The current studies have following implication

- This research may have implications for developing psychological interventions aimed at individuals with high neuroticism and high levels of perceived stress.
 Strategies to manage stress and mitigate risktaking tendencies can be designed.
- In practical applications, this research can inform risk management practices in various industries, such as finance or decisionmaking in high-pressure environments. Understanding the link between neuroticism, stress, and risk-taking can lead to more informed risk assessment and mitigation strategies.
- This research can be applied to the development of mental health support programs. It may be used to identify individuals at risk of engaging in risky behaviors due to their neuroticism and stress levels and provide them with appropriate support and counseling.
- As this research involved a student population, consider implications for educational strategies. It may suggest the need for stress management and emotional regulation programs in educational institutions to help students cope with the impact of neuroticism on risk-taking.
- In a corporate context, research could inform the design of workplace wellness programs. Employers might use this information to develop stress reduction and resilience-building programs, which, in turn, could potentially reduce risky decision-making in high-stress work environments.
- In the context of broader societal implications, it could influence public policy related to mental health, stress management, or risk regulation; for instance, in areas where public safety and decision-making under stress are significant concerns.

References

Abbasi, I.S. The role of neuroticism in the maintenance of chronic baseline stress perception and negative affect. Span. J. Psychol. 2016, 19, E9. [CrossRef]

Amir, M., & El Gillany, A. H. (2010). Self-reported depression and anxiety by students at and Egyptian medical school. *J Pak Psychiatr Soc*, 7(2), 71.

Anand, K., & Nagle, Y. K. (2016). Perceived stress as predictor of psychological well-being among Indian youth. *The International Journal of Indian Psychology*, *3*(4), 211-17.

Anestis, M. D., Selby, E. A., & Joiner, T. E. (2007). The role of urgency inmaladaptive behaviors. Behaviour Research and Therapy, 45(12), 3018-3029.

Asendorpf, J. B., & Wilpers, S. (1998). Personality effects on social relationships. Journal of Personality and Social Psychology, 74(6), 1531-1544.

Ashton, M. C. (1998). Personality and job performance: The importance of narrow traits. *Journal of Organizational Behavior*, 19(3), 289–303.

Bolger, N., & Schilling, E. A. (1991). Personality and the problems of everyday life: The role of neuroticism in exposure and reactivity to daily stressors. *Journal Of personality*, 59(3), 355-386.

Byrnes, J. P., Miller, D. C., & Schafer, W. D. (1999). Gender differences in risk taking: A meta-analysis. Psychological Bulletin, 125(3), 367-383.

Byrnes, J. P., Miller, D. C., & Schafer, W. D. (1999). Gender differences in risk taking: A meta-analysis. *Psychological bulletin*, *125*(3), 367.

Carver, C. S., Scheier, M. F., & Weintraub, J. K. (1989). Assessing coping strategies: A theoretically based approach. *Journal of Personality and Social Psychology*, 56(2), 267-283.

Ceccato, S., Kudielka, B. M., & Schwieren, C. (2016). Increased risk taking in relation to chronic stress in adults. *Frontiers in psychology*, *6*, 2036.

Cohen, S. (1994). Perceived stress scale. In Encyclopedia of Behavioral Medicine (pp. 1913-1915). Springer.Cohen, S., Janicki-Deverts, D., & Miller, G. E. (2007). Psychological stress and disease. JAMA, 298(14), 1685-1687.

Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. Journal of Health and Social Behavior, 24(4), 385-396.

Cooper, M. L., Kuntsche, E., Levitt, A., Barber, L. L., & Wolf, S. (2017). Motivational models of substance use: A review of theory and research on motives for using alcohol, marijuana, and tobacco. In Oxford Research Encyclopedia of Communication.

Costa Jr, P. T., & McCrae, R. R. (1992). Normal personality assessment in clinical practice: The NEO Personality Inventory. Psychological Assessment, 4(1), 5-13.

- Costa, P. T., & McCrae, R. R. (1985). The NEO Personality Inventory. *Psychological Assessment Resources*.
- Deci, E. L., & Ryan, R. M. (1985). Intrinsic motivation and self-determination in human behavior. This is one of the seminal papers that introduced the
- concepts of SDT and its framework. It can be found in the journal "Perspectives on Psychological Science."
- Deci, E. L., & Ryan, R. M. (2000). The "what" and "why" of goal pursuits: Human needs and the self-determination of behavior. *Psychological Inquiry*, 11(4), 227-268.
- Derefinko, K. J., Peters, J. R., Eisenlohr-Moul, T. A., Walsh, E. C., Adams, Z. W. Lynam, D. R., & Cyders, M. A. (2014). Relations between trait impulsivity, behavioral impulsivity, physiological arousal, and risky sexual behavior among young men. Archives of Sexual Behavior, 43(6), 1149-1158.
- Eysenck, H. J. (1967). The biological basis of personality. Springer.
- Eysenck, H. J. (1967). The biological basis of personality. Thomas.
- Eysenck, H. J. (1990). Biological dimensions of personality. In L. A. Pervin (Ed.), Handbook of personality: Theory and research (pp. 244-276). *Guilford Press*.
- Figner, B., & Weber, E. U. (2011). Who takes risks when and why? Determinants of risk taking. *Current Directions in Psychological Science*, 20(4), 211-216.
- Flett, G. L., Hewitt, P. L., & Dyck, D. G. (1989). Self-oriented perfectionism, neuroticism and anxiety. *Personality and individual differences*, 10(7), 731-735.
- Folkman, S., & Lazarus, R. S. (1980). An analysis of coping in a middle-aged community sample. Journal of Health and Social Behavior, 21(3), 219-239.
- Folkman, S., & Lazarus, R. S. (1988). Coping as a mediator of emotion. Journal of
- Personality and Social Psychology, 54(3), 466-475.
- Hawkins, J. D., & Catalano, R. F. (2002). Risk and protective factors for alcohol and other drug problems in adolescence and early adulthood: Implications for substance abuse prevention. Psychological Bulletin, 112(1), 64-105.
- Hofmann, S. G., Sawyer, A. T., Witt, A. A., & Oh, D. (2010). The effect of mindfulness- based therapy on anxiety and depression: A meta-analytic review. Journal of Consulting and Clinical Psychology, 78(2), 169-183.
- Horiuchi, S., Tsuda, A., Yoneda, K., & Aoki, S. (2018). Mediating effects of perceived stress on the relationship of positivity with negative and positive affect. *Psychology research and behavior management*, 299-303.
- Jam, F. A., Khan, T. I., Anwar, F., Sheikh, R. A., Kaur, S., & Malaysia, L. (2012). Neuroticism and job

- outcomes: Mediating effects of perceived organizational politics. *African Journal of Business Management*, 6(7), 2508-2515.
- Jessor, R., & Jessor, S. L. (1977). Problem behavior and psychosocial development: A
- longitudinal study of youth. Academic Press
- Jia, X., Zhu, H., Sun, G., Meng, H., & Zhao, Y. (2021). Socioeconomic status and risk-taking behavior among Chinese adolescents: the mediating role of psychological capital and self-control. *Frontiers in psychology*, *12*, 760968.
- Jirakran, K., Vasupanrajit, A., Tunvirachaisakul, C., Maes, M., 2023. The effects of adverse childhood experiences on depression and suicidal behaviors are
- partially mediated by neuroticism: A subclinical manifestation of major depression. 14.
- Joneghani, N. A., & Sajjaian, I. (2023). The mediating role of perceived stress in the relationship between neuroticism and death anxiety among women in Isfahan during the coronavirus pandemic. *Journal of Education and Health Promotion*, 12.
- Kahneman, D., & Tversky, A. (1979). Prospect theory: An analysis of decision under risk. Econometrica, 47(2), 263-291.
- Kessler, R. C., Chiu, W. T., Demler, O., & Walters, E. E. (2005). Prevalence severity, and comorbidity of twelve-month DSM-IV disorders in the National
- Comorbidity Survey Replication (NCS-R). Archives of General Psychiatry, 62(6), 617-627.
- Kim, S. E., Kim, H. N., Cho, J., Kwon, M. J., Chang, Y., Ryu, S., ... & Kim, H. L. (2016). Direct and indirect effects of five factor personality and gender on depressive symptoms mediated by perceived stress. *PloS one*, *11*(4), e0154140.
- Kotov, R., Gamez, W., Schmidt, F., & Watson, D. (2010). Linking "big" personality traits to anxiety, depressive, and substance use disorders: *A meta-analysis*.
- Psychological Bulletin, 136(5), 768-821.
- Lahey, B. B. (2009). Public health significance of neuroticism. American Psychologist, 64(4), 241-256. Lazarus, R. S., & Folkman, S. (1984). Stress, Appraisal, and Coping. Springer Publishing Company.
- Lejuez, C. W., Aklin, W. M., Zvolensky, M. J., & Pedulla, C. M. (2003). Evaluation of the Balloon Analogue Risk Task (BART) as a predictor of adolescent real world risk-taking behaviours. Journal of Adolescence, 26(4), 475-479.
- Lejuez, C. W., Paulson, A., Daughters, S. B., Bornovalova, M. A., & Zvolensky, M. J. (2006). The association between heroin use and anxiety sensitivity among inner-city individuals in residential drug use treatment. Behaviour Research and Therapy, 44(5), 667-677.
- Loewenstein, G. F., Weber, E. U., Hsee, C. K., & Welch, N. (2001). Risk as feelings. Psychological Bulletin, 127(2), 267-286.

- Lupien, S. J., McEwen, B. S., Gunnar, M. R., & Heim, C. (2009). Effects of stress throughout the lifespan on the brain, behaviour and cognition. Nature Reviews Neuroscience, 10(6), 434-445.
- M. F. (2013). Attachment, autonomy, and emotional reliance: A multilevel model. *Journal of Counseling and Development*, 91(3), 301–312. doi:10.1002/j.1556 6676.2013.00098.x
- Malouf JM, Thorsteinsson EB, Schutte NS. The relationship between the fve-factor model of personality and symptoms of clinical disorders: a meta-analysis.
- JPsychopathol Behav Assess. 2005;27:101–14. https://doi. org/10.1007/s10862-005-5384-y. . Kendler KS,
- Kuhn J, Prescott CA. The interrelationship of neuroticism, sex, and stressful life events in the prediction of episodes of major depression. Am J Psychiatry. 2004;161:631–6
- McCrae, R. R., & Costa, P. T. (2003). Personality in adulthood: A five-factor theory perspective (2nd ed.). Guilford Press.
- McEwen, B. S. (1998). Protective and damaging effects of stress mediators: Central role of the brain. Dialogues in Clinical Neuroscience, 8(4), 367-381.
- McEwen, B. S. (2007). Physiology and neurobiology of stress and adaptation: Central role of the brain. Physiological Reviews, 87(3), 873-904.
- Miller, J. D., & Pilkonis, P. A. (2006). Neuroticism and affective instability: the same or different?. *American Journal of Psychiatry*, 163(5), 839-845.
- Mund, M., & Neyer, F. J. (2021). Wild horses dressed like unicorns: Relationship effects on personality. In J. F. Rauthmann (Ed.), The handbook of personalitydynamics processes 227-246). Elsevier. and (pp. https://doi.org/10.1016/B978-0-12-813995-0.00009-1 Nicholson, N., Soane, E., Fenton-O'Creevy, M., & Personalityand Willman, P. (2005). domainspecific risk taking. Journal of Risk Research, 8(2), 157-176.
- Ong, A. D., Bergeman, C. S., & Boker, S. M. (2009). Resilience comes of age: Defining features in later adulthood. Journal of Personality, 77(6), 1777-1804
- Ormel J, Jeronimus BF, Kotov R, Riese H, Bos EH, Hankin B, Rosmalen JGM , Oldehinkel AJ. Neuroticism and common mental disorders: meaning and utility of a complex relationship. Clin Psychol Rev. 2013;33(5):686–97.
- https://doi.org/10.1016/j.cpr.2013.04.003.
- Ormel, J., & Wohlfarth, T. (1991). How neuroticism, long-term difficulties, and life situation change influence psychological distress: a longitudinal model. *Journal of personality and social psychology*, 60(5), 744.

- Ozer, D. J., & Benet-Martinez, V. (2006). Personality and the prediction of consequential outcomes. *Annual Review of Psychology*, *57*, *401-421*.
- Paulus, M. P., Rogalsky, C., Simmons, A., Feinstein, J. S., & Stein, M. B. (2003). Increased activation in the right insula during risk-taking decision making is
- related to harm avoidance and neuroticism. *Neuroimage*, 19(4), 1439-1448
- Rani, S., Saleem, S., & Zahra, S. T. (2022). Neuroticism and Psychosocial Stressors of Trauma in University Students: The Mediating Role of Self-Esteem and Self-Appraisal of Trauma. *Pakistan Journal of Psychological Research*, *37*(4), 679-696.
- Rasmussen, E. B., Scheier, L. M., & Greenhouse, J. B. (2009). Depression, impulsiveness, and health-related outcomes among cocaine users. Journal of Substance Abuse Treatment, 37(4), 471-476.
- Reyna, V. F., & Farley, F. (2006). Risk and rationality in adolescent decision-making: Implications for theory, practice, and public policy. *Psychological Science in the Public Interest*, 7(1), 1-44.
- Reynolds, E. K., Schreiber, W. M., Geisel, K., MacPherson, L., Ernst, M., & Lejuez, C. W. (2013). Influence of social stress on risk-taking behavior in adolescents. *Journal of anxiety disorders*, 27(3), 272-277.
- Rietschel, L., Zhu, G., Kirschbaum, C., Strohmaier, J., Wüst, S., Rietschel, M., & Martin, N. G. (2014). Perceived stress has genetic influences distinct from neuroticism and depression. *Behavior genetics*, *44*, 639-645.
- Roberts, B. W., & DelVecchio, W. F. (2000). The rankorder consistency of personality traits from childhood to old age: A quantitative review of longitudinal studies. *Psychological Bulletin*, 126(1), 3-25.
- Sahi, M., & Raghavi, M. (2016). A study of personality in relation to resilience and stress. *International Journal for Innovation Education and Research*, 4(2), 10-18.
- Schneider, T.R. The role of neuroticism on psychological and physiological stress responses. J. Exp. Soc. Psychol. 2004, 40, 795–804. [CrossRef] .
- Schneider, T.R.; Rench, T.A.; Lyons, J.B.; Riffle, R.R. The influence of neuroticism, extraversion and openness on stress responses. Stress Health 2012, 28, 102–110
- Scorza, P., Corbeil, T., Wall, M., Monk, C., Suglia, S., Wainberg, M., ... & Duarte, C. S.(2022). Adverse childhood experiences and perceived stress in early adulthood in the context of disadvantage. *Child Abuse & Neglect*, *131*, 105687.
- Shehzad, S., Waheed, Z., Butt, H., Farooq, A., Khan, N. R., & Khan, K. (2020). Big-5 Personality Traits in Medical and Dental Students of Khyber Pakhtunkhwa, Pakistan. *PSYCHOLOGY AND EDUCATION*, *57*(9), 7639-43.

Strathman, A., Gleicher, F., Boninger, D. S., & Edwards, C. S. (1994). The consideration of future consequences: Weighing immediate and distant outcomes behavior. Journal of Personality and Social Psychology, , 742-752.

Suls, J., Green, P., & Hillis, S. (1998). Emotional reactivity to everyday problems, affective inertia, and neuroticism. Personality Social Psychology Bulletin, 24(2), 127-136.

Tamres, L. K., Janicki, D., & Helgeson, V. S. (2002). Sex differences in coping behavior: A metaanalytic review and an examination of relative coping. Personality and Social Psychology Review, 6(1), 2-30.

Thongsomboon, W., Kaewkiattikun, K., & Kerdcharoen, N. (2020). Perceived stress and associated factors among pregnant women attending antenatal care in urban Thailand. Psychology research and behavior management, 1115-1122.

Watson, D., & Clark, L. A. (1984). Negative affectivity: The disposition to experience aversive emotional states. Psychological Bulletin, 96(3), 465-490.

Yuyang Zhu Effects of acute stress on risky decisionmaking are related to neuroticism: fMRI study of the Balloon Analogue Risk Task https://doi.org/10.1016/j.jad.2023.08.038

Zuckerman, M. (1979). Sensation seeking: Beyond the

optimal level of arousal. Erlbaum.

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