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The Moderating Role of Childhood Experiences in the Relationship between Personality Traits and Social Anxiety

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ABSTRACT

This study aims at investigating the relationship between childhood experiences, social anxiety, and personality factors. The sample consisted of 121 participants aged between 18 and 71 years ($M = 28.54$, $SD = 13.12$). Of these, 78.5% ($N = 95$) are female, and 20.7% ($N = 25$) male, one person identified as genderfluid, also 51.2% ($N = 62$) come from the urban area and 48.8% ($N = 59$) from the rural area. Following the analysis of the statistical data, it was observed that positive relationships with the family significantly influence the levels of social anxiety in the different age categories, and agreeableness moderates the relationship between positive relationships with the family in the age range of 5-12 years and performance anxiety. In conclusion, analysis of these results may bring a deeper understanding of the interactions between positive family relationships, social anxiety/performance anxiety, and other influencing factors, contributing to the development of more effective and personalized interventions in the treatment of social anxiety.

Keywords: childhood experiences, social anxiety, openness, conscientiousness, extraversion, agreeableness, neuroticism

1. INTRODUCTION

The study emphasizes the importance of studying the relationship between childhood experiences, social anxiety and personality factors, with the goal of better understanding the development of social anxiety disorders. Negative childhood experiences and attachment styles can influence the onset of social anxiety, and certain personality traits, such as neuroticism, can increase vulnerability. The study of these links can support the development of early interventions and prevention strategies to improve the quality of life of those affected, while contributing to the development of more effective mental health policies.

Childhood experiences

Childhood experiences, divided into positive and negative, significantly influence later development and well-being in adulthood (Yancura & Aldwin, 2009). They shape brain health and development (Bethell et al., 2019) and contribute to adult psychological states, although research on the combined effect of adverse (ACE) and positive experiences (PCE) remains limited (Hou et al., 2022). Negative experiences, such as parental abuse or loss, have lasting consequences on mental health (Andryszewska & Rybakowski, 2016), increasing the risk of depression and risky behaviors (Daines et al., 2021). Conversely, positive experiences such as social support and secure relationships protect against anxiety and depression (Wang et al., 2021) and may counteract the negative effects of adverse experiences (Hou et al., 2022). Studies show that these experiences foster prosocial development and prevent antisocial behaviors (Kosterman et al., 2011). To support harmonious development, intervention programs must work with families, promoting secure attachment and healthy routines (Crandall et al., 2019). Thus, it is essential to recognize the impact of both positive and negative experiences on psychological health, focusing not only on risk factors, but also on protective factors, to support resilience and long-term well-being.

Exposure to adverse childhood experiences can lead to distinct functional and structural brain changes in adults with major depressive disorder or chronic pain, compared to those without such experiences (Antoniou et al., 2023). Childhood adversity and positive childhood experiences are somewhat independent of each other; many individuals experiencing both, and the presence of one does not exclude the other. PCEs more commonly predict better outcomes on their own, independent of

childhood adversity, rather than interacting with or moderating the effects of adversity on those outcomes (Han et al., 2023).

Adverse childhood experiences are linked to negative health and developmental consequences across the short, medium, and long term, with their impact potentially being cumulative, particularly during critical periods of sensitivity and developmental plasticity. These effects can be further exacerbated by global challenges such as climate change, conflict, and population displacement (Bhutta et al., 2023).

Most studies show that parental ACEs can influence children's outcomes either directly or indirectly, often through pathways such as maternal mental health challenges or factors related to parenting (Zhang et al., 2023).

Social anxiety

Anxiety is defined as a feeling of fear in the face of possible negative future outcomes, with sources of threat that can be real or imagined (Schlenker & Leary, 1982, apud Lesse, 1970). This frequently occurs in situations involving interpersonal evaluations, such as public speaking or social gatherings, and can persist even in the absence of other people, often being associated with fear of negative judgment (Leary & Kowalski, 1997). Can progress to social anxiety disorder (SAD) when it significantly affects daily functioning (Morrison & Heimberg, 2013). People with social anxiety tend to interpret social interactions as dangerous and consequently avoid them, which can exacerbate loneliness and self-esteem problems (Fung et al., 2017). Social anxiety includes both concerns about performance in social contexts and fears about criticism or mistakes (Schlenker & Leary, 1982).

Performance anxiety, a subtype of social anxiety, manifests itself in specific situations such as public speaking, exams or artistic performances, where individuals fear making mistakes in front of others (Cox & Kenardy, 1993; Kantor-Martynuska & Domaradzka, 2018). This anxiety involves physical (shaking, sweating), cognitive (negative thoughts), behavioral (avoidance of situations), and psychological (critical self-evaluation) reactions (Ely, 1991). Although performance anxiety is considered a social phobia, it is currently classified as a transient reaction to a specific stimulus, but it has the potential to become chronic under certain conditions (Kantor-Martynuska & Domaradzka, 2018). Studies show that the most common type is the fear of public speaking, which affects both artistic performances and professional activities, where the fear of negative evaluation is predominant (Lazarus & Abramovitz, 2004).

Personality factors

Personality is an essential concept in the study of human behavior, and the study of individual differences is a central topic in psychology. Although there is no universally accepted definition, personality can be understood as a set of traits that influence individual behaviors, manifesting in unique ways in various situations (Tavajoh & Yaqubi, 2019). Raymond B. Cattell made significant contributions to personality taxonomy using empirical methods, examining the terms used to describe traits (Goldberg, 1990). An influential model in this field is the "Big Five" factor theory, adopted in the 1980s and 1990s, which includes openness, conscientiousness, extraversion, agreeableness, and neuroticism (Ashton et al., 2009). Each dimension has specific features: neuroticism is related to anxiety and insecurity, agreeableness to cooperation and compliance, conscientiousness to responsibility and organization, openness to creativity and curiosity, and extraversion to sociability and energy (Milfont & Sibley, 2012).

Longitudinal studies, such as that of Cobb-Clark & Schurer (2012), show that personality traits are relatively stable over the long term, although they can be influenced by factors such as age, education or income. In conclusion, personality represents distinct patterns of thinking and behavior, making each individual unique (Tavajoh & Yaqubi, 2019).

The relationship between childhood experiences, social anxiety, and personality factors

The link between maltreatment, household dysfunction, and depressive symptoms are significantly mediated by neuroticism. Additionally, the relationship between poor parent-child bonding and depressive symptoms are significantly influenced by neuroticism, conscientiousness, and extraversion (Li et al, 2023). Moderation analyses indicated that childhood maltreatment reduces the stability of conscientiousness and emotional stability, while also leading to lower average levels of extraversion, conscientiousness, and emotional stability. The effects of maltreatment on some of these traits appeared to be more pronounced during adolescence and tended to decrease in young adulthood, suggesting that individuals who experience maltreatment may demonstrate some resilience as they age. However, the impact of maltreatment persisted into adulthood for certain traits, potentially explaining the long-term negative effects of childhood caregiver-related trauma on overall well-being and quality of life (Cohen, 2023). A significant positive relationship is found between childhood maltreatment and social anxiety, social anxiety is more strongly associated with emotional maltreatment compared to physical or sexual

maltreatment. Similarly, emotional abuse is more strongly linked to social anxiety than physical or sexual abuse, but no significant differences were observed in the impact of physical maltreatment versus sexual maltreatment on social anxiety (Liu et al., 2023). Endorsing adverse childhood experiences is strongly and positively associated with symptoms of anxiety, depression, and suicidality. Parallel mediation analyses reveal that social support, negative affect, and life satisfaction statistically mediated the link between ACEs and psychopathological outcomes in adulthood (Kobrinisky, & Siedlecki, 2023).

There are studies that have reported relationships between the total score of childhood negative experiences and the personality traits of extraversion, agreeableness, conscientiousness, and openness. In contrast, there is a significant positive correlation between the total score of negative childhood experiences and neuroticism. It can be concluded that nearly half of the study sample experienced moderate negative childhood experiences, and approximately half exhibited traits of neuroticism (Saleh et al., 2023).

There is a significant link between negative childhood experiences and social anxiety, although the mechanisms of this relationship are not yet fully understood. Studies suggest that a sense of security plays an essential role in this connection (Meng et al., 2021). For example, Eikenaes et al. (2015) found that childhood neglect is more commonly associated with avoidant personality disorder than with social phobia. Abbasi-Asl et al. (2016) identified personality traits such as neuroticism that are correlated with social anxiety, and childhood trauma is associated with Type D personality and symptoms of anxiety and depression (Demirci et al., 2016). Also, childhood psychological abuse can contribute to social anxiety through neuroticism and lack of positive coping (Liu et al., 2021).

Rambau et al. (2018) showed that negative childhood experiences are related to avoidant personality and social anxiety, and these effects are mediated by affective bonds, while childhood trauma can affect behaviors and emotional regulation (Bruijnen et al., 2019). The studies of Öztürk and Mutlu (2010) and Kuo et al. (2011) pointed out a significant association between childhood trauma and symptoms of social anxiety and depression, particularly in adults with social anxiety disorder.

Halldorsson et al. (2023) found that children with social anxiety disorder are highly concerned with the perceptions of others and have frequent negative and self-critical thoughts. Memories of being teased in childhood have also been linked to social anxiety and the fear of gelotophobia (Edwards et al.,

2010), and Binelli et al. (2012) identified a significant correlation between negative childhood events and social anxiety, with a greater impact on females. Thus, childhood experiences play an important role in the development of social anxiety, and women appear to be more vulnerable to this impact than men.

The present study

The main objective of the study was to explore the relationship between childhood events and social anxiety by identifying moderators among personality dimensions. In this regard, the following hypotheses were formulated:

2. METHOD

Participants and procedure

The study sample was made through a convenience sampling method, including people from Romania, especially students, who completed a Google questionnaire distributed online, and participation was voluntary. 121 people between the ages of 18 and 71 participated ($M = 28.54$, $SD = 13.12$). Of these, 78.5% (95) were female, 20.7% (25) male, and one person identified as genderfluid. Regarding the place of origin, 51.2% (62) were from the urban environment, and 48.8% (59) from the rural environment. Regarding education, 68.6% (83) of the participants completed high school studies, 21.5% (26) undergraduate studies, 9.1% (11) master's studies and 0.8% (1) doctoral studies.

This paper uses quantitative research to examine the relationships between adverse childhood experiences and social anxiety, also investigating the role of personality factors in moderating this interaction. The questionnaires were applied online through Google Forms, being distributed on social networks such as Facebook and WhatsApp. Participation was voluntary, and the inclusion criterion was 18 years of age. Before completing the questionnaires, the participants were asked for their informed consent according to the legal regulations on the protection of personal data. The data collected was used for academic purposes only.

Statistical analysis was performed using SPSS 24, including data centralization, calculation of subscale scores for each questionnaire, and classification of adverse experiences according to participant age. Social anxiety was divided into social anxiety and performance anxiety subscales, and personality factors were assessed separately. Hypothesis testing was performed by Pearson correlation, multiple regression and moderation analysis using the PROCESS extension (Hayes, 2018).

H1: *Positive relationships with family statistically significantly correlates with levels of social anxiety in different age groups.*

H2: *Positive relationships with family statistically significantly correlates with levels of performance anxiety in different age groups.*

H3: *Agreeableness moderates the relationship between positive family relationships in the 5-12 age range and performance anxiety.*

Instruments

International Personality Item Pool (IPIP). To assess personality dimensions (Goldberg et al, 2006), scales that were translated and adapted for the Romanian population were used (Iliescu et al., 2015). Openness scale: This consists of 10 items rated on a 5-point Likert scale, measuring a person's affinity for the creative structures of the world. Cronbach's alpha coefficient indicated good internal consistency ($\alpha = .74$). Neuroticism scale: Consisting of 10 items, this questionnaire assesses emotional stability and the tendency to be calm or not. Internal consistency was high ($\alpha = .86$). Conscientiousness scale: With 10 items, this questionnaire measures the level of staying on task and ordering. The Cronbach alpha coefficient showed high internal consistency ($\alpha = .86$). Agreeableness scale: Also consisting of 10 items, it assesses the preference to avoid conflicts and to please others. Internal consistency was $\alpha = .73$. Extraversion scale: It measures a person's tendency to prefer socializing and exposure in social environments, with a high internal consistency coefficient ($\alpha = .86$).

Liebowitz Social Anxiety Scale (LSAS). A 24 item questionnaire assessing social interaction anxiety and performance anxiety. The LSAS was designed with the following features: (1) it includes a wide range of items that are challenging for individuals with social phobia; (2) it distinguishes between performance and social anxiety components through separate subscales; (3) it provides distinct ratings for fear or anxiety and avoidance; and (4) all patients receive four subratings: performance fear or anxiety, performance avoidance, social fear or anxiety, and social avoidance (Liebowitz, 1987). The internal consistency is very high ($\alpha = .95$), and on the subscales, social interaction anxiety had $\alpha = .93$ and performance anxiety $\alpha = .91$.

Childhood Experiences Questionnaire (CES). Childhood experiences from ages 0 to 19 were assessed retrospectively using the Childhood Experiences Scale (Aldwin

et al., 1998). Designed for use with the general population, the CES collects individuals' recollections of 46 childhood events and experiences categorized by the age ranges of 0–5 years, 5–12 years, and 13–19 years. The Negative Events and Discipline subscales of the CES are designed to capture adverse experiences. Drawing on the work of Werner and Smith (2001), the CES also includes questions about positive experiences, such as close relationships with parents and other adults, forms of parental praise, and general perceptions of the respondent's character. Additionally, it addresses childhood accomplishments. This questionnaire measures positive and negative childhood experiences. The Cronbach alpha coefficient was $\alpha = .72$ (0-5 years), $\alpha = .79$ (5-12 years) and $\alpha = .74$ (13-19 years).

3. RESULTS

Descriptive statistics

In order to observe the characteristics of the variables measured on the relevant sample, a series of descriptive analyzes were performed on the mean, standard deviation,

Each questionnaire was assessed for internal consistency, and the results suggest good or very good reliability for most of them.

Study design and objective

The design is non-experimental, therefore, no causal conclusions can be drawn on the relationships elaborated and investigated in the present study.

In this study the objective is to examine and understand the association between childhood experiences, level of social anxiety and personality factors. Thus, by achieving this objective, the study will contribute to a deeper understanding of the complex relationship between childhood experiences, social anxiety and personality factors, providing relevant information for the development of intervention and support strategies in the field of mental health.

skewness and kurtosis indicators. It is observed from Table 1 that all study variables exhibit desirable psychometric characteristics of a normal distribution. Before testing the statistical hypotheses, a series of correlation matrices was performed in order to better observe and understand the associations between the facets of the three measured constructs. Only those associations that are statistically significant will be commented.

Table 1

Table of descriptive statistics

	M	SD	Skewness	Kurtosis
Social Anxiety	2.34	.835	-.00	-.66
Performance Anxiety	3.04	.923	-.17	-.53
Extraversion	3.09	.838	.09	-.12
Agreeableness	4.11	.55	-.69	.25
Conscientiousness	3.47	.84	-.05	-.57
Neuroticism	2.83	.85	-.03	-.08
Openness	3.80	.63	-.49	.11
Positive relationships 0-5 years	3.37	.61	-.21	-.02
Positive relationships 5-12 years	3.52	.62	-.51	.07
Positive relationships 13-19 years	3.46	.61	-.16	-.32

For the facets of social anxiety, it was observed that the subscales social anxiety and performance anxiety are strongly positively associated ($r = .66$, $p < .001$, $r^2 = .45$). Regarding the personality facets, a significant association of extraversion with conscientiousness ($r = .17$, $p < .050$, $r^2 = .03$) and neuroticism ($r = -.46$, $p < .001$, $r^2 = .45$). Agreeableness is significantly associated with conscientiousness ($r = .36$, $p < .001$, $r^2 = .13$).

Conscientiousness with neuroticism ($r = -.46$, $p < .001$, $r^2 = .23$) and openness to experience with neuroticism ($r = .21$, $p < .050$, $r^2 = .04$). The assessment of positive relationships with parents across age groups shows strong correlations. Between 0-5 years and 5-12 years there is a statistically significant and strong correlation ($r = -.76$, $p < .001$, $r^2 = .60$), this is also valid for 0-5

years and 13-19 years ($r = -.59, p < .001, r^2 = .35$) and for 5-12 years with 13-19 years ($r = -.74, p < .001, r^2 = .58$).

Hypotheses testing

A series of linear regressions were performed between positive family relationships and social anxiety across all three age categories to test the validity of the first hypothesis (Table 2). First, between positive relationships between 0-5 years and social anxiety $\beta = -.25, t = -2.81, p < .001$. The regression being statistically significant $F(1, 119) = 7.92, p < .001$ with an $R^2 = .06$ which means that the positive relationships between 0-5 years explain 6% of the total variance of social anxiety. The second, between positive relationships between 5-12 years and social anxiety $\beta = -.22, t = -2.46, p < .001$. The regression being

statistically significant $F(1, 119) = 6.08, p < .001$ with an $R^2 = .04$ which means that positive relationships between 5-12 years explain 4% of the total variance of social anxiety. The third, between positive relationships between 13-19 years and social anxiety $\beta = -.21, t = -2.37, p < .050$. The regression being statistically significant $F(1, 119) = 5.63, p < .001$ with an $R^2 = .04$ which means that positive relationships between 13-19 years explain 4% of the total variance of social anxiety. All these aspects can be observed in Table 2.

Therefore, we conclude that our data support the hypothesis that positive family relationships statistically significantly influence levels of social anxiety in different age categories according to statistical data.

Table 2

Linear regression coefficients

Variable	B	95% CI	β^a	t	P
Positive relationships 0-5 years	-.38**	[-.57; -.10]	.34**	-2.81	.000
Positive relationships 5-12 years	-.29**	[-.53; -.05]	-.36**	-2.46	.000
Positive relationships 13-19 years	-.29*	[-.53; -.04]	-.21*	-2.37	.001

The results support the hypothesis than „Positive relationships with family statistically significantly influence levels of social anxiety in different age groups.”

To test the validity of the second hypothesis, a series of linear regressions were also conducted between positive family relationships and performance anxiety across all three age categories (Table 3). First, between positive relationships between 0-5 years and performance anxiety $\beta = -.27, t = -3.06, p < .001$. The regression being statistically significant $F(1, 119) = 9.36, p < .001$ with an $R^2 = .07$ which means that the positive relationships between 0-5 years explain 7% of the total variance of performance anxiety. The second, between positive relationships between 5-12 years and performance anxiety $\beta =$

-.21, $t = -2.46, p < .01$. The regression being statistically significant $F(1, 119) = 5.88, p < .001$ with an $R^2 = .04$ which means that the positive relationships between 5-12 years explain 4% of the total variance of performance anxiety. The third, between positive relationships between 13-19 years and performance anxiety $\beta = -.21, t = -2.35, p < .05$. The regression being statistically significant $F(1, 119) = 5.53, p < .01$ with an $R^2 = .04$ which means that the positive relationships between 13-19 years explain 4% of the total variance of performance anxiety.

Following the statistical data, we conclude that the hypothesis according to which positive relationships with the family statistically significantly influence the levels of performance anxiety in the different age categories is supported by the statistical data.

Table 3

Linear regression coefficients

Variable	B	95% CI	β^a	t	P
Positive relationships 0-5 years	-.40**	[-.66; -.14]	-.27**	-3.06	.000
Positive relationships 5-12 years	-.32*	[-.58; -.05]	-.21**	-2.42	.000
Positive relationships 13-19 years	-.31*	[-.58; -.06]	-.21*	-2.35	.001

Furthermore, the second hypothesis is also supported by the results, indicating that positive relationships with family statistically significantly influence levels of performance anxiety in different age groups.

A series of personality factor moderations were conducted between positive family relationships across the three age stages and social anxiety (Table 4). Neither

relationship was found to be statistically significant. Moderation analyzes were carried out in the three age categories of personality factors in the relationship with performance anxiety and the relationship with the family. Only one relationship was significant, namely that between Positive Relationships 5-12 years and Agreeableness.

Table 4

Moderation table of personality factors between the relationship, positive relationships in the age period 5-12 years and performance anxiety

	B	SE	Z	P
Positive relationships 5-12 years	.10	.10	-1.02	.302
Extraversion	.08	.08	-7.76	< .001
Positive relationships 5-12 ani * Extraversion	.11	.11	-.50	.619
Positive relationships 5-12 years	.12	.12	-2.03	.044
Agreeableness	.14	.14	-1.64	.101
Positive relationships 5-12 years * Agreeableness	.25	.25	-2.13	.033
Positive relationships 5-12 years	.12	.12	-2.02	.047
Conscientiousness	.09	.09	-2.07	.036
Positive relationships 5-12 years * Conscientiousness	.14	.14	-.53	.596
Positive relationships 5-12 years	.11	.11	-1.19	.235
Neuroticism	.08	.08	7.15	< .001
Positive relationships 5-12 years * Neuroticism	.12	.12	.74	.454
Positive relationships 5-12 years	.13	.13	-2.39	.012
Openness	.13	.13	-.02	.973
Positive relationships 5-12 years * Openness	.22	.22	-.00	.992

A moderation analysis was carried out for the moderating role of agreeableness between positive relationships with family in the age range of 5-12 years and performance anxiety $\Delta R^2 = .06$ which shows a statistically significant effect $F(1, 118) = 8.32$; $p < .05$ effect that is more pronounced at a standard deviation in minus $\beta a = -.03$; $p > .05$ without having a significant effect, but this effect decreases even

more at a standard deviation above the mean $\beta a = -.55$; $p < .001$ and is statistically significant (Table 4). The only significant moderating relationship being the one mentioned above.

Following these analyses, we conclude that the hypothesis according to which agreeableness moderates the relationship between positive relationships with family in the age range 5-12 years and performance anxiety is supported by statistical data.

Table 5

The moderating effect at different levels of agreeableness on the relationship between relationships with family in the age period 5-12 years and performance anxiety being the dependent variable

	B	SE	Z	p
Average	-.26	.13	-1.99	.042
Low (-1SD)	-.03	.19	-.16	.867
High (+1SD)	-.55	.18	-2.93	.002

So, in the relationship between childhood experiences between the ages of 5-12 (predictor) and performance anxiety (dependent variable), we noticed that agreeableness has a

moderating role, this being the only relationship among all 30 possible combinations which was statistically significant.

4. DISCUSSIONS

Research on the link between childhood experiences, social anxiety and personality traits highlights how early factors can influence an individual's psychological state. Studies show that negative experiences (such as trauma or abuse) increase the risk of social anxiety in adulthood, while a supportive family environment can protect against it. Cognitive and emotional factors also play a central role in determining the negative perceptions and physical reactions associated with anxiety. Also, personality traits such as avoidance or negative self-perception can amplify social anxiety, suggesting a complex interaction between personality and childhood experiences. Research findings indicate that positive family relationships reduce social and performance anxiety, but other factors, such as social influences and life experiences, also contribute to this phenomenon.

Studies show that agreeableness can influence the impact of family relationships on anxiety, but not always in a positive way. Thus, a holistic approach is needed in the assessment and treatment of anxiety, given the diversity of factors involved. This paves the way for more personalized and effective interventions in the management of social and performance anxiety.

5. REFERENCES

Aldwin, C. M., Levenson, M. R., Cupertino, A. P., & Spiro III, A. (1998). Personality, childhood experiences, and drinking patterns in older men: Findings from the Normative Aging Study. In *Proceedings of the Fifth International Congress of Behavioral Medicine* (p. 82).

Antoniou, G., Lambourg, E., Steele, J. D., & Colvin, L. A. (2023). The effect of adverse childhood experiences on chronic pain and major depression in adulthood: a systematic review and meta-analysis. *British Journal of Anaesthesia*, 130(6), 729-746. <https://doi.org/10.1016/j.bja.2023.03.008>

Ashton, M. C., Lee, K., Goldberg, L. R., & de Vries, R. E. (2009). Higher Order Factors of Personality: Do They Exist? *Personality and Social Psychology Review*, 13(2), 79–91. <https://doi.org/10.1177/1088868309338467>

Bethell, C., Jones, J., Gombojav, N., Linkenbach, J., & Sege, R. (2019). Positive childhood experiences and adult mental and relational health in a statewide sample: Associations across adverse childhood experiences levels. *JAMA pediatrics*, 173(11), e193007-e193007. doi:10.1001/jamapediatrics.2019.3007

Conclusion

The present study investigated the relationship between childhood experiences, social anxiety, and personality traits. Results showed that positive family relationships significantly reduce social and performance anxiety at various ages. Also, agreeableness moderates this influence especially in children between 5-12 years. The conclusion emphasizes the importance of this area of research, contributing to the identification of risk and protective factors, the understanding of psychological mechanisms, and the development of more effective interventions for the prevention and treatment of social anxiety.

Limitations and further research. The study has several important limitations. The childhood experiences questionnaire used is adapted from another research (Yancura & Aldwin, 2009) and has not been validated on the Romanian population, which may affect the accuracy of the results. The small sample may introduce variability and uncontrolled external influences, reducing the statistical power and reliability of the conclusions. Also, being a non-experimental design, causal relationships cannot be established. To improve the research, it is necessary to validate the instrument on the local population and replicate the study on a larger sample.

Bhutta, Z. A., Bhavnani, S., Betancourt, T. S., Tomlinson, M., & Patel, V. (2023). Adverse childhood experiences and lifelong health. *Nature Medicine*, 29(7), 1639-1648. <https://doi.org/10.1038/s41591-023-02426-0>

Cobb-Clark, D. A., & Schurer, S. (2012). The stability of big-five personality traits. *Economics Letters*, 115(1), 11–15. <https://doi.org/10.1016/j.econlet.2011.11.015>

Cohen, M. T. (2023). *The Role of Child Maltreatment on Personality from Adolescence to Young Adulthood* (Doctoral dissertation, St. John's University (New York)).

Cox, W. J., & Kenardy, J. (1993). Performance anxiety, social phobia, and setting effects in instrumental music students. *Journal of anxiety disorders*, 7(1), 49-60. [https://doi.org/10.1016/0887-6185\(93\)90020-L](https://doi.org/10.1016/0887-6185(93)90020-L)

Crandall, A., Miller, J. R., Cheung, A., Novilla, L. K., Glade, R., Novilla, M. L. B., & Hanson, C. L. (2019). ACEs and counter-ACEs: How positive and negative childhood experiences influence adult health. *Child Abuse & Neglect*, 96, 104089. <https://doi.org/10.1016/j.chiabu.2019.104089>

Daines, C. L., Hansen, D., Novilla, M. L. B., & Crandall, A. (2021). Effects of positive and negative childhood experiences

- on adult family health. *BMC Public Health*, 21(1). <https://doi.org/10.1186/s12889-021-10732-w>
- Ely, M. C. (1991). Stop performance anxiety!. *Music educators journal*, 78(2), 35-39. <https://doi.org/10.2307/3398258>
- Fung, K., Paterson, D., & Alden, L. E. (2017). Are Social Anxiety and Loneliness Best Conceptualized as a Unitary Trait? *Journal of Social and Clinical Psychology*, 36(4), 335–345. doi:10.1521/jscp.2017.36.4.335 <https://doi.org/10.1521/jscp.2017.36.4.335>
- Goldberg, L. R., Johnson, J. A., Eber, H. W., Hogan, R., Ashton, M. C., Cloninger, C. R., & Gough, H. G. (2006). The international personality item pool and the future of public-domain personality measures. *Journal of Research in personality*, 40(1), 84-96. <https://doi.org/10.1016/j.jrp.2005.08.007>
- Han, D., Dieujuste, N., Doom, J. R., & Narayan, A. J. (2023). A systematic review of positive childhood experiences and adult outcomes: Promotive and protective processes for resilience in the context of childhood adversity. *Child abuse & neglect*, 144, 106346. <https://doi.org/10.1016/j.chiabu.2023.106346>
- Heimberg, R. G., Horner, K. J., Juster, H. R., Safren, S. A., Brown, E. J., Schneier, F. R., & Liebowitz, M. R. (1999). Psychometric properties of the Liebowitz social anxiety scale. *Psychological medicine*, 29(1), 199-212. <https://doi.org/10.1017/S0033291798007879>
- Hou, H., Zhang, C., Tang, J., Wang, J., Xu, J., Zhou, Q., ... & Wang, W. (2022). Childhood experiences and psychological distress: can benevolent childhood experiences counteract the negative effects of adverse childhood experiences?. *Frontiers in Psychology*, 13. <https://doi.org/10.3389/fpsyg.2022.800871>
- Iliescu, D., Popa, M., & Dimache, R. (2015). Adaptarea românească a Setului Internațional de Itemi de Personalitate: IPIP-Ro. *Psihologia Resurselor Umane*, 13(1), 83-112.
- Jaworska-Andryszewska, P., & Rybakowski, J. (2016). Negative experiences in childhood and the development and course of bipolar disorder. *Psychiatr. Pol*, 50(5), 989–1000. <https://doi.org/10.12740/PP/61159>
- Kantor-Martynuska, J., & Domaradzka, E. (2018). Performance anxiety: The need for an integrative approach. *Polish Psychological Bulletin*, 49(3), 272-282. DOI-10.24425/119495
- Kobrinisky, V., & Siedlecki, K. L. (2023). Mediators of the relationship between adverse childhood experiences (ACEs) and symptoms of anxiety, depression, and suicidality among adults. *Journal of Child & Adolescent Trauma*, 16(2), 233-246. <https://doi.org/10.1007/s40653-022-00510-0>
- Kosterman, R., Mason, W. A., Haggerty, K. P., Hawkins, J. D., Spoth, R., & Redmond, C. (2011). Positive Childhood Experiences and Positive Adult Functioning: Prosocial Continuity and the Role of Adolescent Substance Use. *Journal of Adolescent Health*, 49(2), 180–186. <https://doi.org/10.1016/j.jadohealth.2010.11.244>
- Lazarus, A. A., & Abramovitz, A. (2004). A multimodal behavioral approach to performance anxiety. *Journal of clinical psychology*, 60(8), 831-840. <https://doi.org/10.1002/jclp.20041>
- Leary, M. R., & Kowalski, R. M. (1997). *Social anxiety*. Guilford Press.
- Li, Y., Cheng, L., Guo, L., Zhu, L., Zhao, H., Zhang, C., ... & McIntyre, R. S. (2023). Mediating role of personality traits in the association between multi-dimensional adverse childhood experiences and depressive symptoms among older adults: a 9-year prospective cohort study. *Journal of affective disorders*, 331, 167-174. <https://doi.org/10.1016/j.jad.2023.03.067>
- Liebowitz, M. R. (1987). Liebowitz social anxiety scale. *Journal of Anxiety Disorders*. <https://doi.org/10.1037/t07671-000>
- Liu, J., Deng, J., Zhang, H., & Tang, X. (2023). The relationship between child maltreatment and social anxiety: a meta-analysis. *Journal of affective disorders*, 329, 157-167. <https://doi.org/10.1016/j.jad.2023.02.081>
- Milfont, T. L., & Sibley, C. G. (2012). The big five personality traits and environmental engagement: Associations at the individual and societal level. *Journal of Environmental Psychology*, 32(2), 187-195. <https://doi.org/10.1016/j.jenvp.2011.12.006>
- Morrison, A. S., & Heimberg, R. G. (2013). Social anxiety and social anxiety disorder. *Annual Review of Clinical Psychology*, 9(1), 249-274. <https://doi.org/10.1146/annurev-clinpsy-050212-185631>
- Saleh, W. A., El-said, S. G., & Hamza, H. G. (2023). Childhood Negative Experiences and Personality Traits among Port-Said University Students. *Port Said Scientific Journal of Nursing*, 10(4), 49-76. [10.21608/pssjn.2023.208492.1257](https://doi.org/10.21608/pssjn.2023.208492.1257)
- Schlenker, B. R., & Leary, M. R. (1982). Social anxiety and self-presentation: A conceptualization model. *Psychological bulletin*, 92(3), 641. <https://doi.org/10.1037/0033-2909.92.3.641>
- Tavajoh, Z., & Yaqubi, M. (2019). Personality Traits and Translation Quality: An Investigation of the Relationship in Iran Context. *Studies in Linguistics and Literature*, 3(4), 267.
- Wang, D., Jiang, Q., Yang, Z., & Choi, J.-K. (2021). The longitudinal influences of adverse childhood experiences and positive childhood experiences at family, school, and neighborhood on adolescent depression and anxiety. *Journal of Affective Disorders*, 292, 542–551. <https://doi.org/10.1016/j.jad.2021.05.108>

Werner, E. E., & Smith, R. S. (2001). *Journeys from childhood to midlife: Risk, resilience, and recovery*. Cornell University Press.

Yancura, L. A., & Aldwin, C. M. (2009). Stability and change in retrospective reports of childhood experiences over a 5-year period: findings from the Davis Longitudinal Study. *Psychology and aging*, 24(3), 715. <https://doi.org/10.1037/a0016203>

Zhang, L., Mersky, J. P., Gruber, A. M. H., & Kim, J. Y. (2023). Intergenerational transmission of parental adverse childhood experiences and children's outcomes: A scoping review. *Trauma, Violence, & Abuse*, 24(5), 3251-3264. DOI: 10.1177/15248380221126186