



A Review of Antisocial Personality Disorder

Shungui Xiang¹, Yin Tang² and Jun Zhang^{3*}

¹Library, Tourism College of Zhejiang, Hangzhou, 311231, China

²School of Travel Services and Management, Tourism College of Zhejiang, Hangzhou, 311231, China

³Department of Education, Sehan University, Yeongam-gun, Jeollanam-do, 650106, Republic of Korea



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Author : Dr. Jun Zhang

Introduction

Antisocial personality is a type of personality characterized by persistent violation of social norms, infringement on others' rights, and a lack of responsibility. It is closely associated with aggressive behavior, criminal activity, and poor social adaptation. With the increasing prominence of mental health issues, the formation mechanisms and intervention pathways of antisocial personality have gradually become a major focus of research. Existing studies suggest that antisocial personality is not caused by a single factor, but rather results from the interaction of multiple biological, psychological, and social factors. Therefore, systematically reviewing its theoretical foundations, influencing factors, and intervention approaches is of great significance for understanding its developmental mechanisms and formulating effective intervention strategies.

In clinical diagnosis, the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) defines it as Antisocial Personality Disorder (ASPD) and specifies that diagnosis must be based on persistent patterns of behavior. Meanwhile, the International Classification of Diseases (ICD-11) published by the World Health Organization provides additional clarification of related characteristics. It should be noted that antisocial personality differs from psychopathy, with the latter placing greater emphasis on emotional coldness and manipulativeness [3]. The formation of antisocial personality can be explained from multiple theoretical perspectives. Biological theories suggest that genetic factors play a significant role, and twin studies have demonstrated a high heritability of antisocial behavior [4]. Neuroscientific research further indicates that dysfunction in the prefrontal cortex may lead to impaired impulse control. From a psychological perspective, psychoanalytic theory attributes antisocial personality to insufficient development of the superego; behaviorist theory emphasizes the role of reinforcement history in shaping maladaptive behavior; and cognitive theory highlights the presence of cognitive deficits such as hostile attribution bias. In addition, social environmental theories propose that parenting styles, peer influence, and socio-cultural context play crucial roles in personality development [8].

Influencing Factors of Antisocial Personality

The development of antisocial personality is the result of long-term interactions among multiple factors, among which individual, family, and social factors constitute the three core dimensions. From the perspective of individual factors, innate temperament and personality traits play a fundamental role in the development of antisocial personality. For instance, individuals with high impulsivity, low conscientiousness, low empathy, and a strong tendency toward sensation-seeking are more likely to exhibit aggressive and rule-breaking behaviors. At the same time, genetic factors are also considered to be associated with antisocial behavior. Relevant studies have shown that abnormalities in neural functioning (e.g., insufficient regulatory capacity of the prefrontal cortex) may lead to deficits in impulse control and moral judgment, thereby increasing the risk of antisocial behavior. In addition, cognitive biases are equally important. For example, hostile attribution bias and delayed moral cognitive development may cause individuals to interpret others' behaviors as hostile, thus triggering aggressive responses.

Family factors represent the most direct and earliest environmental influences in the formation of antisocial personality. Maladaptive parenting styles—such as neglect, overindulgence, authoritarian control, or abuse—can weaken the internalization of social norms, making it difficult for individuals to develop stable moral constraints. In particular, in family environments lacking emotional support and effective supervision, individuals are more likely to develop traits such as emotional coldness, egocentrism, and irresponsibility. Moreover, frequent family conflict, unstable parental relationships, or dysfunctional family structures may further reinforce antisocial tendencies through negative

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*Correspondence:

Dr. Jun Zhang, Department of Education, Sehan University, Yeongamgun, Jeollanam-do, 650106, Republic of Korea, Tel: 01066678155;

E-mail: zhangjunahnu@163.com/
ORCID: <https://orcid.org/0009-0004-1221-9920>

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modeling and emotional stress. In addition, parents' own antisocial or delinquent behaviors may influence children's behavioral patterns through role modeling and social learning mechanisms [9].

Social factors exert a continuous influence on antisocial personality at a more macro level. Peer influence is especially critical; during adolescence, involvement with deviant peer groups can reinforce rule-breaking behaviors through group norms. A lack of social support systems may also weaken individuals' sense of belonging and responsibility, making them more likely to engage in oppositional behaviors. Furthermore, low socioeconomic status, limited educational resources, and adverse community environments (e.g., high-crime areas) increase exposure to antisocial behavior and reduce behavioral constraints. In addition, long-term exposure to violent media content may further strengthen aggressive tendencies through observational learning. Overall, individual factors provide the internal vulnerability for antisocial personality, family factors shape early behavioral patterns, and social factors continuously reinforce or buffer these tendencies throughout development. The interaction of these three dimensions jointly determines the formation and developmental trajectory of antisocial personality [2].

Intervention and Treatment of Antisocial Personality

The intervention and treatment of antisocial personality require a comprehensive approach across three levels: psychological, family and social, and preventive strategies, in order to achieve effective correction of behavioral patterns and long-term improvement. At the psychological level, Cognitive Behavioral Therapy (CBT) is considered one of the most effective approaches. Its core lies in identifying and modifying maladaptive cognitions (e.g., hostile attribution bias and deficits in moral cognition), thereby altering behavioral response patterns. In addition, emotion regulation training is an important method; by enhancing individuals' awareness and control of their emotions, it helps reduce impulsivity and aggressive behaviors [1]. Furthermore, some studies emphasize the positive role of Motivational Interviewing in improving treatment adherence among individuals with antisocial personality traits.

At the family and social levels, family therapy is widely applied, particularly Functional Family Therapy and Multisystemic Therapy, which reduce antisocial behaviors by improving family interaction patterns, strengthening parental supervision, and rebuilding emotional support systems [7]. Meanwhile, establishing a strong social support network (e.g., school-based support and community interventions) is also crucial. Stable social support enhances individuals' sense of belonging and adherence to social norms, thereby reducing behavioral deviance.

In terms of prevention strategies, early intervention is widely recognized as critical, especially during childhood and adolescence. Behavioral correction training, social skills development, and school-based mental health education can effectively reduce the risk of developing antisocial personality [5]. For example, behavior management training and peer relationship interventions for high-risk children can correct problematic behaviors before they become entrenched. At the policy level, improving the distribution of educational resources, optimizing community environments, and reducing social inequality are also essential for providing healthier developmental conditions [6]. Overall, intervention and treatment should emphasize a multi-level integrated approach: improving

internal mechanisms through psychological intervention, optimizing external environments through family and social support, and reducing risk through early prevention, thereby achieving systematic and long-term outcomes.

Future Research and Prospects

Future research on antisocial personality can be further advanced through interdisciplinary integration, methodological improvement, and localization. First, from a theoretical perspective, greater integration of neuroscience, genetics, and psychology is needed. Based on the biopsychosocial model, future studies should explore the underlying mechanisms of antisocial personality in greater depth. For instance, existing research has shown that abnormalities in the prefrontal cortex and emotion-processing regions are closely associated with antisocial behavior; future studies may combine neuroimaging techniques with longitudinal data to further reveal developmental trajectories. Second, in terms of research methods, it is necessary to move beyond the limitations of cross-sectional designs by adopting more longitudinal and experimental approaches to strengthen causal inference and capture dynamic changes among variables. In addition, multi-method assessments (e.g., combining self-reports, informant reports, and behavioral indicators) can enhance the reliability of findings.

Furthermore, localization of research should be strengthened. The manifestations and mechanisms of antisocial personality may vary across cultural contexts; therefore, it is necessary to develop culturally appropriate measurement tools and intervention models within the Chinese context. Finally, future studies should place greater emphasis on early prevention and intervention pathways, particularly during childhood and adolescence, by integrating family, school, and community resources to develop more systematic and sustainable intervention models. Overall, future research should advance through the integration of mechanism exploration, methodological innovation, and practical application, in order to achieve a more comprehensive understanding of antisocial personality.

Conclusion

In conclusion, the formation and development of antisocial personality represent a complex process involving multi-factor and multi-level interactions. Its roots lie not only in individual temperament traits and cognitive biases but also in family environments, including parenting styles and emotional support, as well as broader social and cultural influences. Existing research indicates that antisocial personality is characterized by systematic abnormalities in emotional, cognitive, and behavioral mechanisms, and also has a neurobiological basis, highlighting its complexity and long-term nature. In terms of intervention and treatment, single approaches are often insufficient. Instead, psychological interventions centered on Cognitive Behavioral Therapy, systemic interventions focusing on improving family functioning, and early prevention strategies targeting children and adolescents have been shown to be more effective. Meanwhile, future research should further promote interdisciplinary integration, optimize research methodologies, and advance localization efforts to enhance both theoretical explanatory power and practical applicability. Overall, understanding and addressing antisocial personality requires a holistic biopsychosocial perspective. Only through multi-level coordinated efforts can the risks associated with antisocial personality be effectively controlled and individuals' social adaptability be improved.

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