

Comparative study regarding firstly aggression and secondly, regarding the relationship between aggression and automatic, dysfunctional thoughts and the locus of control, applied on three categories of teenagers coming from: reeducation center, child protection center and non-institutionalized teenagers

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Abstract

Aggressive behavior can be considered both a means of expressing one's personality, and a means of communicating one's own exigency against peer pressure. In present time, mass-media, research and official statistics have shown a surge in school violence in more countries. This phenomenon has been advertised considerably in more countries: USA, France, UK and, recently, Romania. Aggressive behavior is an indicator of violence especially in males, teenage violence being also the expression of violence in society. In the same context, from the same study, the identification of possible differences on levels of physical and verbal aggression was monitored in three categories of teenagers, two of which comprising institutionalized teenagers (from a reeducation center and from a center of child protection), respectively one category of teens who are not institutionalized. Also, apart from identifying possible differences at the physical and verbal aggression, the study monitors the existent relation between aggression and two other dimensions: dysfunctional automatic thoughts and the locus of control. The three categories of teenagers are high school students, 14 to 18 years old. The participants come from institutions from the Western part of the country, Timis County.

Keywords: adolescence, school, aggression, dysfunctional automatic thoughts and the locus of control.

Introduction

Lately, the presence of violence and aggressive behaviors in schools have become a global problem, highly visible, and severe cases of violent attacks in schools, even of crime, are reported and frequently publicized. In this context, there was an accentuation of the growth of both causes of the growth of the incidence of violent and aggressive behaviors but also the effect of these behaviors upon students. In Romania, a small number of theoretical and practical studies focusing on specific adolescent aggression have been published: Tănăsescu & Florescu (1994) [1]; Păunescu (1994) [2]; Mitrofan (1996) [3]; Șoitu & Hăvârneanu (2002) [4]

Historically and culturally speaking, violence is a relative notion, dependent on codes and social, judicial and political norms of the society, having both a defensive and offensive function. Functionally, violence, as the brutal or prolonged disorganization of a personal, collective or social system, and which is translated into a loss of integrity, which can be physical, mental or material (Debarbieux, 1996) [5], cannot be dissociated from aggression, as an intended conduct which aims at producing harm (injury, destruction, damage) to people (including self) or objects (Ferris & Grisso, 1996, in Jianghong, 2006) [6].

The study of aggression and violence goes beyond a single field of study, being the object of psychology, psychiatry, criminology, sociology and biology, having a multidisciplinary character (Craig, Rowell - Huesmann, 2003) [7].

Currently, the phenomenon of aggression and school violence is a phenomenon highly publicized, being in the attention of psychologists, school counselors, teachers, parents and researchers due to the high incidence of cases of aggressive behavior and violent acts present in schools or performed by students. The aggressive behavior concerning adolescents can be considered as a way of assertion of personality, but it is also a method of communicating their exigencies to the social environment.

The aggressive behavior is an indicator for violence especially in males, the violence of adolescents being also the expression of violence in society. Generally, school violence and aggression is associated with difficult urban areas, with urban suburbs, with low socioeconomic status of the family, having as generating sources both external factors to the school, of family, social and individual nature and internal factors to the school, of the type of managing aggressive behavior of adolescents. Also, one series of relatively recent research (Farmer, Estell, Bishop, O Neal, Cairns, 2003 [8] ; Rodkin, Farmer, Pearl, Van Acker, 2000 [9]; Dodge, Lansford, Burks, Bates, Pettit, Fontaine, Price, 2003 [10]) shows the existence of a reciprocal influence between aggressive behavior and social status of aggressive student.

This study attempts to identify a difference concerning aggression between two categories of adolescents, institutionalized and non-institutionalized, and also to identify the relationship between aggression and automatic thoughts, precisely the relationship between aggression and the locus of control.

Reported to the topic, the following assumptions were proposed:

H₁: regarding the level of aggression, some differences can be seen between institutionalized adolescents (rehabilitation center and child care center) and non-institutionalized adolescents (high school students from Timisoara) in the following sense: the observed level of aggression of non-institutionalized participants is higher compared with the level of aggression of institutionalized participants.

H₂: regarding non-institutionalized participants (high school students from Timisoara), the recorded level of aggression is positively correlated with the recorded level of automatic thoughts.

H₃: regarding non-institutionalized participants, the level of aggression is correlated with the locus of control in the following sense: the high level of aggression is positively correlated with the locus of control by externalizing the locus of control.

METHOD

Participants

The teenagers (N = 89) who took part in this study are from two population categories: 2 centers with institutionalized participants, 25 subjects from a reeducation center and 14 subjects from a center of child protection, respectively, 50 non-institutionalized subjects, students in one of the high schools in Timisoara. A convenience sampling procedure was used in this study.

Eligibility criteria for the participants: age between 14 and 18 whose current status is unrestricted (participants are accepted no matter the sex).

Instruments and procedure

Automatic Thoughts Questionnaire (ATQ – Automatic Thoughts Questionnaire; authors: dr. Steve Hollon and dr. Phillip Kendall) adapted by Ramona Moldovan, MA. Copyright: Institute for the Advanced Study of Psychotherapies and Applied Mental Health (David, 2006) [11]. ATQ measures automatic dysfunctional and irrational thoughts (descriptive and inferential cognitions and specific evaluative cognitions). In the instructions, the four week period can be modified to better suit the need of the clinician (for example, the last two weeks); a period longer than four weeks is never used because of possible memory errors. The scale is administrated on paper both individually and in group. Individual administration is preferable where it is applicable. It is administrated without any time limitation. After providing the necessary materials and conditions for the administration of the scale, the evaluation of the patient can begin. Each of the 15 items is given a mark from 1 to 5, where 1 = never and 5 = almost always. The total ATQ score is obtained through the summation of each item's mark and the interpretation of the results is done through a categorization in 5 normalized classes. A high score in ATQ shows a high level of automated dysfunctional and irrational thoughts while a lower score in ATQ shows a low level of automated dysfunctional and irrational thoughts.

Locus of Control Scale is a survey developed by Rotter (1966) [12] and represents an instrument which measures the internal or external position of the locus of control. This scale comprises 29 items, of which 23 target the locus of control directly and 6 are neutral, being included to make the aim of the test more ambiguous (items 1, 8, 14, 19, 24, 27). Every item has two statements, "a" or "b", one concerning the internal part and the other concerning the external one. The subject must indicate for each item one of the two statements, "a" or "b", which best suits his own belief. The final score is obtained by adding the earned points and ranges from 0 to 23 points. In this scale, the lowest score means an internal locus of control, while the highest means an external locus of control. The higher the score, the more significantly it shows

that the subject believes that the effects are caused by external factors. A score of over 12 points shows an external orientation of the subject. Median scores and deviations standard to the Locus of control scale vary depending on investigation, being between 7.73 (3.82) and 9.22 (3.88). Generally, the differences in score between sexes are insignificant. The internal consistency coefficient of the scale is between .65 and .79. The test – retest fidelity coefficient for a month is .72.

Aggression survey (Buss, Perry, 1992) [13]. The instrument, developed for evaluating aggression, includes 29 items, having a very good level of trust, alpha coefficient being 0.89 and the test – retest fidelity coefficient is 0.80. Every item is marked on a scale from 1 to 5. The level of aggression is obtained by adding all item scores and has values between 9 and 45.

As regards the administration procedure on population of interest, the eligible participants were informed of the purpose of the research and their informed consent was requested, while the following questionnaires were subsequently applied in the presence of a research assistant: ATQ – Automatic Thoughts Questionnaire (David, 2006), Locus of Control Scale (1966) and The Aggression Scale (Buss, Perry, 1992).

Design

The study has a non-experimental design. Data analysis was run using the independent „t” test and the correlation method (linear correlation coefficient Pearson, r) under the statistic program of data analysis SPSS version 16 (Howitt, Cramer, 2010) [14].

RESULTS

Table 1. Mean, standard deviations, statistical significance and degrees of freedom ($N = 89$) for independent t-test – the differences in the aggression level between institutionalized adolescents (reeducation center and child protection center) and non-institutionalized adolescents (students from a high school in Timisoara).

size	group type	N	M	SD	t	df	p
aggression	institutionalized	39	59.87	22.20	- 4.511	87	.001
	non-institutionalized	50	78.78	17.34			

Table 2. Correlation coefficient, mean, standard deviations, statistical significance and degrees of freedom ($N = 50$) for testing the relationship between aggression and automatic thoughts at the non-institutionalized teenagers (students from a high school in Timisoara).

analyzed relationship	M	SD	r	p	df
aggression	78.78	17.34	0,27	.057	48
-					
automatic thoughts	31.88	10.58			

Table 3. Correlation coefficient, mean, standard deviations, statistical significance and degrees of freedom ($N = 50$) for testing the relationship between aggression and locus of control at the non-institutionalized teenagers (students from a high school in Timisoara).

analyzed relationship	M	SD	r	p	df
aggression	78.78	17.34	-	0,01	.944
-					
locus of control	10.94	2.75			

The results from table 1 support the first hypothesis and show the existence of a significant difference for aggression between the two categories of participants, institutionalized teenagers (reeducation center and child protection center) and non-institutionalized teenagers (students from a high

school in Timisoara). Thus, mean aggression scores in the case of non-institutionalized teenagers ($M = 78.78$, $SD = 17.34$) is significantly higher ($t = -4.511$, $df = 87$, $p = .001$) than the mean score of the institutionalized teenagers ($M = 59.87$, $SD = 22.20$).

When it comes to the second hypothesis, the result from table 2 do not support it; between aggression and automatic thoughts there is no positive correlation ($r = 0.27$, $df = 48$, $p = .057$).

Result from table 3 leave the third hypothesis unsupported as well, in the sense that there is no positive correlation between aggression and locus of control ($r = -0.01$, $df = 48$, $p = .944$).

DISCUSSION AND CONCLUSIONS

Based on the statistical results and the analysis results was observed the existence of statistically significant differences in the aggressiveness between the two groups of teenagers, institutionalized adolescents (rehabilitation center and child care center) and non-institutionalized adolescents (high school students from Timisoara).

Regarding the relationship between aggression and automatic thoughts, results show no correlation between the two dimensions, which is similar to the relationship between aggression and locus of control, the absence of a positive correlation between aggression and locus of control being obvious.

Regarding the first hypothesis, through which was postulated the existence of differences in aggression, it can be seen that there is a statistically significant difference (see Table 1) between the two groups of adolescents, institutionalized and non-institutionalized, mean scores of aggression for non-institutionalized adolescents (the value of the mean score of aggression is 78.78, value which corresponds to a medium-high level of reporting [see Buss, Perry, 1992]) is significantly higher than the mean scores of institutionalized teenagers (the value of the mean score of aggression is 59.87, a value that corresponds to a medium-low level of reporting [see Buss, Perry, 1992]).

When it comes to the correlation postulated between aggression (a value that corresponds to a level of reports medium-high [see Buss, Perry, 1992]) and automatic dysfunctional and irrational thoughts (the level of automatic dysfunctional and irrational thoughts is 31.88, value that corresponds to class 4, respectively to a high level of automatic dysfunctional and irrational thoughts [see David, 2006]) one can observe the lack of a positive correlation (see table 2) between aggression and automatic dysfunctional and irrational thoughts in the case of non-institutionalized participants - students from a high school.

For the last situation, where the existence of a positive correlation between aggression and place of control was postulated, one can observe the absence of any form of association that is statistically significant like in table 3, between aggression and place of control (the value of the mean score of the place of control is 10.94 which corresponds to a tendency of internalization of the place of control [see Rotter, 1966]) in the case of non-institutionalized participants.

In conclusion, for the two categories of participants in the study, institutionalized and non-institutionalized adolescents students, it was found that there is a significant difference in the aggression, the aggression of non-institutionalized participants was higher than the institutionalized teenagers' aggression. Also, the results show the absence of any form of association between aggression and automatic dysfunctional and irrational thoughts and between aggression and place of control, respectively, in the case of non-institutionalized participants.

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