

## **CHAPTER - 3**

### **REVIEW OF LITERATURE**

In the words of Fox (69), "Every research project should be based on all of the relevant thinking and research that has preceded it. When completed, it becomes a part of the same accumulated knowledge in the field and so it contributes to the thinking and research that follows. For any specific project to occupy this place in the development of a discipline.

#### **[A] STUDIES IN INDIA**

**Singh and Singh** (2001) made a study to correlate Roschach measure of Hostility in adolescent girls. 30 different psychological variables were measured on 250 adolescent girls.

#### **FACTOR ANALYSIS**

The main aim of this analysis was to identify the structural relationship among identified correlates of hostility. 33 tests were inter-correlated over the sample (N=250). The 33 x 33 matrix obtained was submitted to principle component analysis. The twelve factors extracted accounted for 69.2% of the variance.

- Factor 1 - Anthropometric measure  
Taller and Heavier grinds tends to be more cooperative (Punjab Sample Culture – greater expectation from parents).
- Factor 2 - Upper ego (Moral goals)
- Factor 3 - Dynamic Adjustment v/s. Anxiety
- Factor 4 - Isolation (shyness, tension)
- Factor 5 - Overactive (overactive women tend to be demanding, own design maker, emotionally less stable)
- Factor 6 - Internal restrain (tend to be cooperative and kind)
- Factor 7 - Intelligence (High intelligence, high emotional stability)
- Factor 8 - Eragic suppression v/s. eragic expression
- Factor 9 - Guilt proneness women
- Factor 10- Hostility – enmity, stubbornness
- Factor 11- Introversion v/s. extroversion
- Factor 12- Home sentiment (attachment to home) parents, sibs.

**Mathew** (1999) studied anger in relation to gender, religion and marital status. The purpose of the study was to explore the role of demographic variable in experience and expression of anger.

### **HYPOTHESIS**

1. There would be no gender difference on anger score.
2. The two religion groups i.e. Hindus and Muslims, will not differ on anger score.

3. Marital status – married and unmarried will not differ on anger variables.

The study was conducted on 115 males, 165 females, were subjected to t-tests. Males scored higher than females on anger, Muslims scored higher than Hindus, married scored higher than unmarried.

**Ratanendra Kumar**, et.al. (1999) made A Study of Aggression in psychotic illness. He says, there are very clearly documented evidence concerning violence by the mentally ill. The violence may be committed on the basis of delusional beliefs or exacerbation of symptomatology. Family members have been the object of violence in more than 50% of the cases.

It is not surprising, therefore, that patients are brought restrained to the psychiatric treatment units. This study was thus conducted to find out whether the perceived aggression by the guardians was the same as the manifest aggression by the patient.

53 consecutive, drug free, psychotic patients attending the C.I.P. O.P.D. for the first time was rated on Social Dysfunction and Aggression Scale (SDAS-9) to measure quantum of aggression and the Brief Psychiatric Rating Scale (BPRS) to assess the psychopathology. The patients were diagnosed using the criteria laid down in ICD X.

BPRS score was significantly higher in schizophrenics as compared to other diagnoses (one way ANOVA,  $p=0.005$ ). Although there was no difference in the aggression scores in different diagnostic categories, manics were significantly more likely to be restrained ( $\chi^2$  test,  $p=0.04$ ).

This study was conducted to:-

- 1) Study the degree of aggression across the various diagnostic groups of psychoses examined at the outpatient department (O.P.D.);
- 2) Find out whether the manifest aggression of the patient is different than the perceived aggression by the relatives;
- 3) Study the correlation between severity of psychotic symptoms and aggression; and
- 4) Find out the demographic variables related to the aggressive acts.

## **MATERIAL AND METHOD**

This study was conducted at the out patient department of Central Institute of Psychiatry (C.I.P.), Ranchi. This is a 643 bedded tertiary referral psychiatric center.

The subjects included all patients attending the C.I.P. O.P.D. for the first time with psychotic features as defined in ICD-10 (WHO, 1992) that is presence of delusions, hallucinations, gross excitement and overactivity, marked psychomotor retardation and catatonic behaviour.

The patients were administered Social Dysfunction and Aggression Scale-9 (SDAS-9) (Wistedt et al., 1990). This scale contains nine items measuring outward aggression and is to be used on the basis of observation and other information. It has a good construct validity, concurrent validity and inter observed reliability (ERAG, 1992). This scale measures irritable mood (irritability, anger, dysphoria), social dysfunction (uncooperativeness, proactive behaviour), verbal aggression (specified and unspecified) and physical aggression against objects and persons. It is thus superior to the Overt Aggression Scale (Yudofsky et al., 1986) which has been used in other studies of aggression. The patients were also administered the Brief Psychiatric Rating Scale (BPRS) to assess the psychopathology. Demographic details were recorded in a proforma specially designed for this study.

Pearsons correlation coefficient between the total of aggression score and the total of BPRS score was 0.4194 which was highly significant ( $p=0.002$ ). Substance abuse was present in 21 cases of which 6 were restrained ( $p=0.97$ , NS). Police case was present in 4 cases (1 manic, 1 bipolar manic and 2 schizophrenics;  $p=0.65$ ). History of organic insult to the brain in the past was present in 3 cases (1 each in the manic, other psychosis and schizophrenic group;  $p=0.35$ ). Criminal behaviour was present in 3 cases of which 1 was Schizophrenic and 2 had the diagnosis of other non organic psychosis ( $p=0.06$ ).

A linear regression analysis with the total of aggression as the dependant variable and family history of mental illness, presence of organic factors, substance abuse, diagnosis, education and sex did not yield any significant factors.

There are large number of studies which suggest that psychiatric patient, exhibit significantly more violent behaviour than the normal population (**Taylor**, 1982; **Wessley et al.**, 1991; **Manmohan**, 1992; **Tardiff & Sweilam**, 1980; **Bartels et al.**, 1991). Among the diagnostic subtypes, aggressive behaviour has been reported in personality disorders (**MacDonald** 1967; **Raperport & Larssen**, 1965). Schizophrenia (**Shader et al.**, 1977; **Tardiff & Sweilam**, 1980; **Craig**, 1982) and drug and alcohol dependence (**Tauson**, 1971; **Zirtin et al.**, 1976). Only a few researchers (**Carlson & Goodwin**, 1973) have reported assaultive behaviour in affective disorders. The study also underscores the fact that aggression is quite common in patients with affective disorders as seen by the high aggression scores of this diagnostic subgroup. However, most of the previous studies on aggression have been retrospective in design (**Shader et al.**, 1977; **Tardiff & Sweilam**, 1980; **Craig**, 1982; **MacDonald** 1967; **Tuason**, 1971). Most of them also did not use standardized diagnostic criteria for diagnosis (**MacDonald**, 1967; **Tuason**, 1971; **Zitrin et al.**, 1976).

There has been a significant correlation between SDAS-9 score and the BPR score which suggests that intensity of symptomatology has a bearing on the overt aggression of the mentally ill.

**Table : Diagnostic details of the sample**

	Manic episode	Bipolar mania	Other psychoses	Schizophrenia	
Male	6	22	7	11	
Female	1	5	1	0	P=ns
BPRS total	17.42±3.82	15.51±5.29	17.62±6.34	23.27±7.24	P=0.005*
SDAS total	22.86±6.87	20.22±5.16	18.12±3.72	21.00±6.43	P=ns**

\* One way analysis of variance,  $F=4.78$ . Post-hoc analysis using Bonferroni correction showed that the schizophrenic group was different from all the other groups at 0.05 level

\*\* One way Analysis of variance,  $F=0.98$ ,  $p=0.4$

**Table : Detail of the patients brought in restrain**

	Restrained	Not restrained	
Male	14	32	
Female	1	6	P=ns
Age (in yrs.)	28.73±6.6	28.18±9.5	T=test, p=ns
BPRS total	18.33±7.51	17.34±5.90	T=test, p=ns
SDAS total	20.33±5.21	20.34±5.63	T=test, p=ns
Mania	1	6	
Bipolar mania	12	15	
Psychosis	0	8	P=0.01
Schizophrenia			

It may be concluded that whereas some aggression may be inherent in manics, schizophrenics or other non organic psychoses, yet the aggression by the community is perceived more from the manics. There being no difference of aggression between the manics and other psychosis, this

anticipatory perception results in unnecessarily restraining the manics by the community which may be deemed to be unwarranted. On the other hand, the right of the community for the protection from aggressive and violent acts of the mentally ill, real or imagined, cannot be rightfully ignored. The simple statement that all mental illness are not violent are unlikely to be fruitful. What is desirable to find positive and negative predictors of violence from the researches conducted in this country and publicise the findings through the media which may result in more humane treatment of the mentally ill.

**“THE FAMILY AND PEER GROUP INFLUENCES IN AGRESSION”  
A STUDY BY PRASHANT TALWAR (1996).**

Attempts to find a relationship between factors in the family, peer group and levels of adolescent aggression. 148 adolescents and their mothers were studied. It was found that negative parenting and exposure to deviant peer influenced aggression among adolescents.

Key Words: Aggression, socialization, parents, peer

The family is the individual's first socialization agent. The fine grained texture of family relationship is revealed through the specific moment to moment discourse between family members, reflecting such basic themes as mutual respect, affection, abuse, or indifference. These family interactions are makers of relationships; provide valuable clues about how they influence



family members. The family is an interconnected system in which members behave and react to each other's.

During adolescence the peer group becomes an important agent of socialization. They acquire a wide range of behaviour from his peer group by interacting with one another, and then the possibilities of learning aggression is high.

**Banduras** (1973) social learning theory views aggression not as innate or because of frustration, but as the manifestation of experiences. He connoted that there are three main components, acquiring of aggressive modes of behaviour, in sighting of aggression and reinforcement of the behaviour.

**Bandura** (1973), contended that patterns of behaviour can be acquired through direct experience or by observing violent behaviour of others viz. modeling. The role of parents, and peer group are important determinants of modeling. People who are repeatedly exposed to aggressive parent or peer models will be more assaultive in their interaction than those who are not exposed.

The focus of this study is on the relationship between socialization and aggression among adolescents. This study explores specific aspects of socialization such as the family and peer influence on the individual. This study has been carried out with the following objectives (1) To determine

the levels of aggression among adolescent;(2) To study the connection between elements of the family and levels of adolescent aggression;(3) To find out the association between factors of the peer group and levels of adolescent aggression (4) To measure the comparative contribution of the family and peer group factors to the levels of aggression.

### **MATERIAL AND METHOD**

The study was done in small locality Southerpet, Manglore. This locality is mainly occupied by people with low socio-economic status. They belong to particular tribe. This class was involved in cleaning waste and removing human excreta two decades back. The total population of Southerpet was 1316 people of which 601 were males and 711 females. All the available adolescents and their mothers were included. In all, 148 adolescents were studied and their mothers included.

Census method was used to collect data. All the respondents were studied in their respective homes. The method of data collection was through interviews. Two interview schedules were used one for the adolescent and the other for the mothers of the adolescents. The first schedule for the adolescents included questions pertaining to their select characteristics, latent aggression scale and a family functioning scale. Additional data were tapped on their peer group factors.

The latent aggression scale was developed by Blackburns [cited in Broadsky and Smitherman,1983].It is a 31 item self inventory. The original item poll was administered by Blackburn to 184 male patients admitted to Broadmoor Hospital in England.He found the reliability of this scale to be 0.88 and the validity 0.37.The reliability of this scale could differ in India. A high score on the aggression scale indicates a likelihood of aggressive feelings.

Family influence was measured by using Bloom's [1985] family functioning scale. It is a self-report scale for the assessment of 15 different aspect of family functioning. Each aspect is measured through students Cronbach alpha, which ranges between 0.40 and 0.85,with mean of 0.71.Average inter item correlation ranges from 0.13 to 0.53,with a mean of 0.36.[values could differ in an Indian setup].Some items receive a score of 1if the response of no 's is made, other items receive a score of 1 if the response of yes is made.

Peer group influence was measured using a questionnaire that included variables like teasing, impulse controls, conflicts, truancy, fight in games and habits. Peer group influence was measured by allotting appropriate weight scores to the different responses to each of the questions included in this dimension.

The second schedule for mother included Deshpande's marriage adjustment inventory [cited in pestonji in 1988]. It is a self- report scale that has 15 dimensions, and each dimension has 5 items. The reliability of this scale is 0.83 and the validity of this scale is 0.49.

The data from the schedule and the scales were transferred to a code sheet.

The data were compiled, and processed using SPSS.

[Statistical package for social sciences].

#### **Results:**

**Table 1**

#### **Adolescent Latent Aggression Scores**

(N=148)

<b>Level</b>	<b>No</b>	<b>%</b>
Low (4-9)	56	37.8
Mid (10-13)	52	35.1
High (14-22)	40	27.1

Table 1 shows that 37.8% of the individuals had low levels of aggression compared to 27.1%, who had relatively high level. About 35.1% of the individuals had moderate levels of aggression.

**Table 2**

#### **Levels of Aggression and Family Functioning**

<b>Levels of Family Functioning</b>	<b>Low (N=56)</b>	<b>Mid (N=52)</b>	<b>High (N=40)</b>	<b>Total (N=148)</b>
Low (24-36)	03	03	06	12
Mid (37-49)	40	33	28	101
High (50-62)	13	16	06	35

Correlation between family functioning and aggression ( $r=-0.18$ ,  $p<0.05$ ). Hence it can be observed that lower the family functioning higher the aggression. Multiple regressions were run to see which variable influenced the family. The item of the family functioning scale has been taken as independent variable and aggression as dependent variable.

**Table 3**  
**Influence of Independent Variable On Aggression**

Variable	Cor	R.Sqr	<u>R.Sqr.change</u>	F	Sig. F
Family conflicts	0.28	0.078	0.078	12.48	0.0006
Fly.organization	-0.26	1.121	0.048	9.92	0.0001
Temperamental differences	-0.21	0.045	0.04	6.94	0.009

R=Regression ; Cor.=Correlation; R-Sqr.=R Square; R.Sqr.ch =R Square change, F=Critical value

Table 3 depicts influence of the independent variable on aggression. Family conflict influenced latent aggression up to 7.8%and family organization influenced aggression up to 4.8%. The cumulated value is 12.6%.

Since family conflicts and family organization influenced adolescent aggression it would be worth examining the parental relations. Adolescent's aggression and parental relations showed an inverse but not significant relation ( $r=- 0.13$ ,N.S.) However, from substantive view the two variables appear to have a relation.

Multiple regressions were done to find out to find out which variable caused disturbance in parental relations.

It can be inferred that temperamental differences that is the extent to which partner adjusts to spouse's temper, moods and nature, caused marital conflicts. In other words mothers of the adolescents were unable to get along too well with their spouses. The extent of influence was up to 4% on the adolescent aggression [table 3].

Peer group influences: correlation analysis between peer group influences and aggression showed a moderate but significant inverse relation [minus 0.18]. Thus the observation that poorer the peer group influence, higher will be the levels of aggression is affirmed. In other words more favourable the peer group influences the lower will be the levels of latent aggression.

At this stage it is indebted to know, which variable either parent or peer group was dominant in influencing adolescent aggression: To assess this a series of multiple regression were done.

From the analysis, the total variance explained was 33.5% of which family influence and peer group influence contributed 22.2% and 11.3% respectively. This clearly indicated that family factors were more dominant than peer group factors in influencing aggression among the adolescents.

Thus, it can be stated that family factors will be more dominant than peer group factors in influencing levels of aggression.

## **DISCUSSION**

Aggression has been defined in copious ways by different authors to include behaviour ranging from aggression in sports to homicide. In simple sentence, aggression can be defined as behaviour aimed at hurting others. Aggression has three sub components: physical aggression, verbal aggression and vandalism. This study has focused solely on the parents and peer group influence on adolescent aggression.

Most accounts of the socialization contributors to the development of aggressive behaviour stress the role of family and peer experiences. In this study, aggression and related behaviour problems have been found associated with high levels of negative parenting behaviours. Indicators of negative parenting vary widely by study but typically include harsh punishment, rejection and intimidation. In this study, few indicators of negative parenting were poor family functioning inscribed by conflicts and poor family organization, temperamental differences among their parents. In other words, the adolescents came from families where there were marital conflicts amongst their parents invariably leading to conflicts in the family and poor family organization. Exposure to physical or verbal abuse, either as a direct victim or a witness to intra familial conflict has been associated with aggression. The victim or witnesses learn to use aggression through

exposure to violence in their families. During the adolescent period of development peer values and belief particularly becomes important substitute for parental values and beliefs and play an essential role in the development of aggression. In this study, peer influence also appears to be a factor, in that exposure to deviant peers leads to increase in aggression, especially among those adolescents who are psychologically susceptible to peer pressure.

In summation, there is extensive amount of empirical evidence supporting the premise that the development of aggression occurs as a function of cumulative transactions among adolescent dispositional characteristics, such as family functioning, and degree of exposure to and involvement with deviant peers.

**SAWHNEY MONIK (1994) MADE A “PSYCHOSOCIAL STUDY OF HUMAN AGGRESSION”. SHE STUDIED 75 COUPLES.**

Major findings of the study are!

- 36.66% of respondents feel that aggression is violent destructive activity which includes abusing and shouting.
- 42.5% of the respondents feel that a totally unsatisfied person or irritated person is an aggressive person.
- Social disapproval is the major cause of aggression for 67.74% of the females.



- 55% of the respondents feel that guilt material is a cause of aggression.
- Over crossing does serve as a cause of aggression for the 53.84% of the respondents.
- Displacement does serve as a major cause of aggression for 50.67% of the respondents.
- For 54% of the respondents frustration is not a cause of aggression however for 72.54% of the females, aggression is due to frustration.
- Verbal provocation serves as a cause of aggression for 61.33%.
- Exposure to aggressive modes serves as a major cause of aggression for 50%.
- Presence of a particular person serves as a cause of aggression for 52% of the respondent.
- Noise or heat causes aggression to 50.67% of the respondents.
- Demand of sex desire serves as a major cause of aggression for 69% of the respondents.
- Fear of reward or punishment is a cause of aggression for 55.33% of the respondents.
- Feelings of low self esteem serves as a cause of aggression for 50.65% of the respondents.
- Level of aggression is high due to the social disapproval for 57.33% of the respondents.

- Non-availability of desired objects causes high level of aggression among 60% of the respondents.
- 67.33% of the respondents are frustrated regarding their socio-economic condition of the family.
- 59.33% of the respondents are not frustrated regarding their social status and physical amenities in the house.
- Health status of the family causes stress to 70% of the respondents.
- Education of the children causes frustration in 54% of the respondents.
- Frustration with aspect of relationship with in-laws is not significant cause of frustration for 72.67% of the respondents.
- Discipline of children causes frustration to 66.67% of the respondents.
- Frustration with regard to poor resources and aspiration for high social status does not cause frustration to nearly 64.76% of the respondent.
- 60% of the respondent do not suffer frustration due to their own roles and responsibilities.
- 42.69% of the respondents having high purpose in life have high level of aggression.
- 61.53% of the respondents having high quality in life have high level of aggression.

## **BISWAS (1992) STUDIED PERCEPTION OF PARENTAL BEHAVIOUR AND ADOLESCENTS FRUSTRATION**

In order to explore (a) how adolescents' perception of parental behaviour (support, punishment, control and protectiveness) is related to their own frustration (Extaggression – E.A., Intraggression – I.A., Imaggression – M.A and Group Conformity Ratings – GCR) and (b) possible sex-difference in those aspects of frustration, the Sarker Parent Behaviour Description Inventory and Reactions to Frustration Test (developed by the investigator) were administered on a random sample of 334 Eighth Grade rural secondary school children. The results indicated: (i) sex-differences in E-A, I-A and GCR and (ii) significant relationship between different dimensions of parental behaviour and adolescents' frustration.

### **OBJECTIVES**

1. To study sex-differences in the directions of aggression (Extaggression, E-A; Intraggression, I-A; Imaggression, M-A) and Group Conformity Ratings, GCR.
2. To examine the possible relationships, that may exist, between adolescents' Perception of Parental Behaviour (Support, Punishment, Control and Protectiveness) and the direction of their frustration as stated in 1.

## **DEFINITION OF TERMS**

The following terms have been defined by **Rosenzweig** (1987) as:

- Extragggression** : Aggression employed overtly and 'turned outward', against the personal or impersonal environment.
- Intragggression** : Aggression is 'turned inward' by the subject against himself.
- Imagggression** : Aggression is 'turned off' – avoided in overt expression.
- Group Conformity Rating** : An index of the degree to which the responses of the individual... conform to those typically given by his normative group in similar situations.

## **HYPOTHESIS**

The following hypothesis were formulated and tested:

1. Adolescent boys and girls would differ with respect to their (i) Extragggression, (ii) Intragggression, (iii) Imagggression, (iv) GCR.
2. (a) Adolescents' perception of parental behaviour (Support, Punishment, Control and Protectiveness) would be related to the aspect of their frustration.  
(b) High and Low groups (two extreme groups formed on the basis of the scores of each dimension of parental behaviours) would differ in the aspect/s of the frustration.

**Table : Mean and S.D. for components of frustration for two extreme groups for girls**

Parental Behaviour		High Group (N=46)				Low Group (N=46)			
		E-A	I-A	M-A	GCR	E-A	I-A	M-A	GCR
Support	M	42.49	24.97	32.03	48.74	49.74	23.65	27.17	44.66
	S.D.	13.97	8.04	10.40	8.37		5.31	10.52	9.43
Punishment	M	49.44	26.17	24.48	49.02	46.97	22.37	30.69	42.91
	S.D.	10.44	5.64	8.50	9.81	12.62	5.90	10.89	8.92
Control	M	45.37	25.69	28.89	49.11	45.77	22.01	30.11	43.06
	S.D.	12.51	7.63	8.47	11.26	13.21	5.72	9.87	8.19
Protectiveness	M	46.81	25.25	28.14	46.51	49.18	22.01	28.85	47.58
	S.D.	12.22	7.51	12.03	8.60	12.85	7.09	9.41	10.46

Next in order to examine these relationships more specifically, means and standard deviations for the two extreme group – High (Top 27%) and Low (Bottom 27%) Parental Behaviour – were computed and the significance of difference between the means was calculated separately for boys and girls.

**Table: Significance of difference between means of two extreme groups for different components of frustration (t-values)**

	Support		Punishment		Control		Protectiveness	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
E-A	2.42*	2.24*	3.61**	1.02	1.30	0.15	1.37	0.91
I-A	0.60	0.93	2.25*	3.17**	0.08	2.63**	2.17*	2.13*
M-A	3.23**	2.23*	2.40	3.04**	2.13*	0.67	0.08	0.32
GCR	2.12*	2.19*	2.07*	3.13**	2.20*	2.94**	0.83	0.59

\* Sig. at 0.05 level

\*\* Sig. at 0.01 level

For girls the significant findings were :

- i) High Parental Support group had greater means in M-A and GCR and lesser mean in E-A than the other group

- ii) High Parental Punishment group had greater means in I-A and GCR and lesser mean in M-A than the other group
- iii) High Parental Control Group had higher means in I-A and GCR;
- iv) High Parental Protectiveness Group had higher means in I-A.

Thus, the second hypothesis was partially retained.

### **RELATIONSHIP BETWEEN PARENTAL BEHAVIOUR AND FRUSTRATION**

The findings of the study pointed out that high parental support characterised by a high degree of nurturance, instrumental companionship, discipline with reason and praise is congenial to the development of Imaggression – a tendency to ‘gloss over’ overt aggression, to make realistic adjustment and compromises in frustrating situations and also to defer or delay gratification; and to show group conformity (GCR), implying social maturity. This kind of trend was also reported by Roy (1990). On the contrary, low parental support was found to be consonant with the development of adolescent Extraggression – the tendency to blame the environment (person, or object) presumably fearing the punishment. Thus, in brief from the mental hygiene point of view, it may be argued that a high degree of parental support is congenial to the development of a healthy personality and frustration tolerance. In its essence, high parental support provides a cordial relationship, love affection, companionship, praise, recognition, etc for the adolescents and thereby they develop a sense of security, self-confidence

(Nayck, 1989), adequacy and identity. All these contribute singly or jointly in the development of a stable personality structure (Symonds, 1939).

## **CONCLUSION**

From the above discussion the following conclusions emerge:

(1) Adolescent boys and girls differ significantly in E-A, I-A and GCR.

These imply that at the adolescence period boys and girls adopt different modes of reactions to frustration.

(2) An adolescent's perception of parental behaviours such as support, punishment, control and protectiveness is related to the major components of frustration (Extragression, Intragression, Imaggression and Group Conformity Ratings). However, these relationships are not always identical for the two sexes. There appears to be some interaction of the levels of parental behaviour and sex of the adolescents on the different aspects of frustration. Therefore, this complicated phenomena may be studied by employing a more sophisticated design in future research.

(3) Moreover, in order to get more information related to this field of study, more variables – subject relevant and situation relevant – may be incorporated.

## **NIDHY SHRIVASTAVA (1988) STUDIED AGGRESSION IN CHILDREN**

Major findings are :- The relationships of aggression with selected variables viz. self concept, achievement motivation and performance (both academic and non-academic) were assumed to be linear and the data were analysed using correlation and coefficients ( $r$ ). They were non significant. Then non linear relationships were assumed and correlation ratios were calculated in the whole sample and then in sub-samples. In case of Baroda boys and Allahabad girls the relationship between aggression and self concept showed some tendency to deviate from linearity but the deviation was very small.

In case of the relationship between aggression and achievement motivation the deviation from the linearity were too small to account for any true non-linear relationship.

In case of relationship between non academic performance and aggression again the Baroda boys and the Allahabad girls sub-samples showed some deviations, though the deviations were not too big.

While comparing the results of the boys and girls samples it was interesting to note that the trend was similar in Baroda boys and in Allahabad girls.

Studying the effect of self concept and achievement motivation and their interactions on aggression it was found that in all the three the effect was not significant.



Since no linear relationship was found to exist between academic performance and aggression and between non-academic performance and aggression that the significant effect by the two independently was not expected and was found true in ANOVA. Here again even the interaction of the two variables viz. academic performance and non academic performance did not show any significant influence. This simply mean that those two variables did not contribute anything to aggression either independently or combinedly.

The ANOVA of sex and cities showed significant value for the two variables independently but no significant value for combined effect. This simply meant that the two sexes were different on aggression score and that the two cities were different where aggression scores of the subjects in the two cities were concerned.

The two cities are different culturally. The nature of the two cities is different. Baroda is an industrial city and like in any industrial city the life becomes more competitive and individuals have to struggle for their existence and livelihood. Like any industrial city Baroda has a mixed culture and this gives rise to the identity crisis for any cultural group. So this might be the reasons why Baroda sample showed higher aggression than those of Allahabad sample which is comparatively less crowded city having less competition and life is slower as compared to that of Baroda.

Boys were higher on aggression across that girls.

Responsibilities for family people caused the development of high aggression in HASs.

Childhood also played important role in the development of low aggression in LASs but had not effect on HASs. More LASs had very comfortable childhood

More HASs had some goal in their life but it did not cause the development of high aggression in them but absence of any life goal did cause the development of low aggression in LASs.

Parental expectations also caused the development of high or low aggression in HASs and LASs. More HASs were held high in parental expectation than those held average or low.

More High Aggression Subjects (HAS) reported to have frustrations than Low Aggression Subjects (LAS). This is in accordance with frustration aggression hypothesis (**Dollard** et al. 1944) that frustration is one of the causes for aggression to occur.

In the light of the above discussion concerning the major findings it could be seen that too low aggression is also undesirable as too high aggression. It is seen that very low aggressive subjects do not have clear goals in their life.

**DR.UDAY JAIN STUDIED (1988) “THE PSYCHOLOGICAL CONSEQUENCES OF CROWDING”**

Crowding would lead to diminished performance, primarily because of individuals being distracted. One also knows that when one is in an unpleasant situation, and when one realizes that there is no escape from such situation, it leads to frustration and, thence, to aggression. And some of the persons with these aggressive tendencies are going to take it out on others.

**“EXTENT AND PATTERN OF REACTIONS TO FRUSTRATION” BY VIRENDRA SINGH (1986)**

**MAJOR FINDINGS OF THE STUDY**

1. The mean age of the sample of teachers selected for study was 38.70 years with standard deviation 7.75.
2. The mean teaching experience of the teachers selected was 15.59 years with standard deviation 7.60.
3. Difference between means of frustration scores of upper and lower age group of teachers was significant at 0.05 level of significance showing effect of age on the frustration of teachers. Teachers who were from upper age group were having high frustration.
4. Differences between means of frustration scores of teachers dichotomized on the basis of sex, status, experience, residence and

academic stream were not significant showing no effect of these variables on the total frustration of teachers.

5. Difference between means of scores on Aggression of male and female teachers was significant at 0.05 levels. Which showed sex difference in Aggression of teachers, male teachers being more aggressive than female teachers.
6. Differences between means of scores on Aggression of teachers dichotomized on the basis of age, status, experience, residence and academic stream were not significant showing no significant effect of these variables on the aggression of teachers.
7. Differences between means of scores on regression of all the teachers dichotomized on the basis of age, sex, status, experience residence and academic stream were not significant showing no effect of these variables on the regressive pattern of frustration.
8. Difference between means of scores on fixation of upper and lower age group of teachers was significant at 0.05 level of significance showing significant effect of age on the fixation of teachers. The teachers of lower age group were more fixating than teachers of upper age group.
9. Differences between means of scores on fixation of teachers dichotomized on the basis of sex, status, experience, residence and academic stream, were not significant, showing no significant effect of these variables on the fixation of the teachers.

10. Differences between means of scores on resignation of all the groups of teachers dichotomized on the basis of six variables were not significant showing no effect of these variables on the fixation of teachers.
11. Difference between means of scores on rationalization of high and low experienced teachers was significant at 0.05 levels of significance showing significant effect of teaching experience on the rationalization of teachers. Teachers having low teaching experience were more rationalizing than high experienced teachers.
12. Differences between means of scores on rationalization of teachers dichotomized on the basis of age, sex, status, residence and academic stream were not significant showing no significant effect of these variables on the rationalization of teachers.
13. Difference between means of scores on projection of lecturers and assistant teachers was significant at 0.05 levels of significance showing significant effect of status on projection of teachers. Assistant teachers were highly projecting than lecturers.
14. So far as extent of frustration was concerned 15% were found to be highly frustrated, 15% low frustrated and 70% in average category.
15.  $X^2$  value on assumption of equal probability of extent of frustration was not significant showing that frustration was not equally distributed in the sample of teachers.

16.  $X^2$  value on assumption of normal occurrence of extent of frustration was significant at 0.05 level showing that extent of frustration was normally distributed in the sample.

17. Similarly on the assumption of normal distribution of extent of different patterns of frustration,  $X^2$  values were calculated and on the basis of significance at 0.05 level following results were found.

- (a) Aggression was not normally distributed in the sample.
- (b) Regression was normally distributed in the sample.
- (c) Fixation was not normally distributed in the sample.
- (d) Resignation was not normally distributed in the sample.
- (e) Rationalization was normally distributed in the sample.
- (f) Projection was not normally distributed in the sample.

18. For the test of dependence of one pattern on the other  $X^2$  values were computed and on the basis of test of significance at 0.05 level following results were found-

- (a) All the remaining five patterns of reaction to frustration were associated with Aggression.
- (b) Regression was associated with aggression, fixation and rationalization but not with resignation and projection.
- (c) Fixation was associated with aggression, regression, resignation and Rationalization but not with projection.

- (d) Resignation was associated with aggression, fixation, Rationalization, but not with regression and projection.
  - (e) Rationalization was associated with aggression, regression, fixation, resignation but not with projection.
  - (f) Projection was associated with aggression, but not with regression, fixation, resignation and rationalization.
  - (g) Adjustment was associated with aggression, resignation and rationalization but not with regression, fixation and projection. Again it was inversely associated with aggression and resignation while directly with rationalization.
19. More than 50% of the teachers selected showed their adjustment towards all the six areas related to classroom, colleagues, principal and co-curricular activities but only 30% showed their adjustment towards problems related to salary and 17% with management.
20. Mean of the adjustment scores of the sample was 18.47 with standard deviation 4.16; which was representative of the total teacher's population. The occurrence of extent of adjustment in the sample was not normal.
21. Age, sex and status had significant effect on the adjustment of teachers while there was no significant effect of experience, residence and academic stream of teachers their adjustment.
22. Highly aggressive teachers were significantly less adjusted than less aggressive teachers.

Regression, fixation and projection exerted no significant effect upon adjustment of teachers.

The teachers who were high resignating and less rationalizing were less adjusted and those who were less resignating and high rationalizing were highly adjusted.

23. There was significant but negative correlation between frustration and adjustment scores of upper age group of teachers, female teachers, highly experienced teachers, low experienced teachers, rural and urban teachers and lecturers as well as social science teachers.

Coefficient of correlation between frustration and adjustment of scores of low age group of teachers, male teachers, assistant teachers and science teachers was not significant at 0.05 levels of significance. These correlations were also negative.

24. The difference between means of the scores on frustration of high and low adjusted teachers was significant at 0.05 levels of significance.

25. The difference between means of the scores on aggression of high and low adjusted teachers was highly significant at 0.05 levels.

26. The differences between means of the scores on regression, fixation, and projection of high and low adjusted teachers were not significant at 0.05 levels of significance.

27. The difference between means of scores on resignation and rationalization of high and low adjusted teachers were significant at 0.05 levels of significant.



**VAGRECHA (1980) STUDIED PATTERNS OF HUMAN AGGRESSION; AND DETERMINANTS OF HUMAN AGGRESSION**  
**FINDINGS ARE AS FOLLOWS:**

- (1) It was found that in the direction of aggression on extraggression there was significant difference between Gujarati and non-Gujarati groups of subject. Gujarati people have significantly better control over externalization or overt exhibition of their aggressiveness compared with non-Gujarati people. It was also born out by day to day observations that common man in Gujarat are law binding.
- (2) Gujarati and non-Gujarati groups of subjects were found to differ significantly on introgressive responses under the direction of aggression. Gujarati people significantly turn their aggression inwardly compared with non-Gujarati people. Observations also reveal that “self-punitive” behaviour prevails to a great extent in Gujarat. These behavioural patterns have been valued and internalized by this culture.
- (3) Gujarati and non-Gujarati groups of subjects were found to differ significantly in aggressive responses under the direction of aggression. Gujarati people significantly evade their aggression in attempt to gloss over the frustration compared with non-Gujarati people.
- (4) Gujarati people had significantly verbalized the obstacles which stands out in their way compared with non-Gujarati people. Situations and individuals causing frustration to them were clearly pointed out.

- (5) It was found that ego-defensive responses were significantly less in Gujarati people than in non-Gujarati people. Ego-defensive responses are frequently destructive and they were significantly minimum in this culture.
- (6) It was found significantly that Gujarati people pursue the goal for solution of the problem despite the obstacles compared with non-Gujarati people. This need persistence behaviour like persistence, renewed striving and continued efforts in overcoming obstacles to one's success are regarded as desirable traits. In fact it is more creative type of aggression than others.

Extraggressive responses attribute frustration to external world and is more "primitive" type of aggression which does not imply reality testing to the same extent as does intro-punitive responses. Results reveal that Gujarati culture has significantly better control over externalization to their aggressiveness and consequently are more mature and near to the realities of life. Significant tendency to self-blame and introspection in Gujarati culture imply an evaluation of the self against external culture standards, which in turn imply object relationships are better maintained. More inaggressive responses in this culture also reveal the tendency to minimize the frustration and tendency to evade aggression as far as possible. This culture also has a keen perception about the obstacles which came in the way to achieve the desired goal. Less ego-dominated responses and more need persistent

responses in this culture are indicative of an achievement oriented society. These are the few patterns of aggressive behaviour indicated by the investigation.

### **DETERMINANTS OF HUMAN AGGRESSION**

As far as determinants of aggressive behaviour are concerned, it was found that the dynamic interplay of physical, economic, political and social forces in this culture alongwith immediate situational factors influenced the group sensitivity to its current environment. "Mood" of the public was product of all these forces. Communication block and alienation aggravated the situation. Within the broad framework of frustration- aggression hypothesis each factor contributed for the acute eruption of aggression and violence in this culture.

- (1) Most of the schools and colleges in Ahmedabad are constricted as far as physical space is concerned and many do not have any playground. More and more physical space in the city is getting converted for commercial exploitation. Thus when human being remains physically restricted for pretty long time, he needs to become over active at least some time which was transisted into agitation and violence on slightest provocation. Severely disturbed areas in the agitation were those which were densely populated.

- (2) Unprecedented price rise of groundnut oil and of grains, inflation and scarcity of essential commodities brought a new economic change which was so sudden that people became massively non adaptive and reacted sharply in the form of agitation.
- (3) People distress with State government during the Chief Ministership of Mr.Chimanbhai Patel reached to its climax. This uncomfortable and instable political situation worked as a catalytic agent to trigger the agitation.
- (4) In Gujarat people are law binding and meticulous but at the same time very much assertive and conscious about their rights. The Gujarati parents have inculcated an awareness of social problems in their children through socialization process. The agitating youths were only attempting to “act out” those expectations which their parents have installed in them. Thus conditions prevailing before the agitation eventually disturbed them much and they reacted sharply towards these conditions.
- (5) Participants in the upsurge were middle class in origin and university students who were feeling alienated and powerless to change their position and when normal channels of communication became ineffective and totally done away with, they desperately resorted to abnormal means of communication in the form of agitation.

## **[B] STUDIES ABROAD**

**KENWYN K. SMITH (2002) IN HIS ARTICLE, “VIOLENCE IS THE LANGUAGE OF UNHEARD” QUOTED MARTIN LUTHER KING ON THE TITLE OF THIS ARTICLE.**

Experiment was conducted by assigning groups:

- The elites
- The middles
- The outs

Participants lived together for several days. No food was given to outs. Hence, they said “eat now, this might be your last meal. We oppose everything you favour. How dare you tell us who are we? We were born homeless and will die homeless”.

When hostility calm down, the death of old thoughts emerged. Terrorist action may try to communicate “haves and have nots struggle to be addressed”.

**A.KINNEY ET.AL. (2001) CONDUCTED STUDY ON “THE INFLUENCE OF SEX, GENDER, SELF-DISCREPANCIES AND SELF-AWARENESS ON ANGER AND VERBAL AGGRESSIVENESS AMONG U.S.COLLEGE STUDENTS**

Among a sample of 445 U.S. college students, the authors examined the extent to which individual differences (e.g. sex, gender, self-discrepancies, self-awareness) explained anger tendencies and verbal aggressiveness. Regression analyses showed that (a) the tendency to repress anger (anger-in) was explained by masculinity, desire to be masculine and public self-awareness,  $R^2=.19$ ,  $F(11,433) = 8.44$ ,  $p<.001$ ; (b) the tendency to express anger (anger-out) was explained by sex, masculinity, and public self-awareness,  $R^2=.17$ ,  $F(11, 433) = 7.38$ ,  $p<.001$ ; and (c) willingness to be verbally aggressive was explained by sex, femininity, and private self-awareness,  $R^2=.32$ ,  $F(11, 433) = 16.94$ ,  $p<.001$ . In addition, different types of individual difference variables accounted for anger tendencies and verbal aggressiveness across sex and gender categories, suggesting that anger and verbal aggressiveness may be driven by different psychological processes across types of participants.

The fact that anger and aggressiveness can surface within a multitude of social contexts make examination of their influences of interest in understanding, preventing, and controlling the behaviours associated with them (Caprara, Barbaranelli, Pastorelli, & Perugini, 1994; Hammock &

**Richardson, 1992; Hammond & Yung, 1993; Infante, 1987; Johnson & Johnson, 1996).** One manifestation of anger and aggressiveness that was both theoretical and practical significance for social scientists but that has not received sufficient attention is verbal aggression.

Verbal aggression and its accompanying emotional activation have personal and social costs associated with each. Teasing, insults, and threats are examples of verbal aggression that contribute to negative interpersonal interactions that have, in turn, been linked to negative health and social outcomes such as harmful physiological-biological conditions (**Burman & Margolin, 1992; Ewart, Burnett, & Taylor, 1983; Hadjifotiou, 1983; Kinney, 1994; Levi, 1972**), self-concept damage (**Ney, 1987; Savin-Williams, 1994; Vissing, Straus, Gelles & Harrop, 1991**), and decreased relational satisfaction (**Levenson & Gottman, 1983 & 1985**). Similarly, evidence suggests that negative affect such as anger may also be linked to negative health outcomes (**Cohen, Tyrell & Smith, 1993; Dougherty, Bolger, Pretson, Jones & Payne, 1992; Herbert & Cohen, 1993; Malarkey, Kiecolt-Glaser, Pearl & Glaser, 1994; O'Leary, 1990; Suls & Wan, 1993**). Uncovering the influences, in the form of individual differences, for anger and verbal aggressiveness may aid in understanding, and perhaps curbing, the personal and social costs associated with each.

**Hypothesis 1** : Males report more anger and verbal aggressiveness than females do.

**Research Question 1:** Do male and females differ with respect to the influences that contribute to their reported anger and verbal aggressiveness?

## **GENDER**

As an explanatory variable, biological sex alone cannot account for many permutations of human behaviour because most actions are context dependent and are influenced by the social milieu in which one is immersed. Social forces often influences beliefs such as values and norms, which, in turn, guide behaviour.

The influence of norms on aggressiveness has been found within intimate relationships (**Infante**, 1989; **Infante, Wall, Leap & Danielson**, 1984) during sporting events (**Harrell**, 1981) and within large crowds (**Bohstedt**, 1994). In these social contexts, individuals can become aggressive if the social environment activates norms that promote aggressiveness or inhibits norms that constrain aggressiveness.

Gender represents one of the clearest cases for the influence of social forces on beliefs and behaviour. Within man societies, socialization of males tends to emphasize qualities such as dominance, autonomy and aggressiveness, whereas for females, socialization tends to emphasize caring and nurturing qualities (**Bem**, 1981). Gender and the degree to which individuals comply



with social expectations such as sex roles may contribute to subjective experiences of anger and verbal aggressiveness.

Unlike biological sex, gender is flexible, suggesting that individual can align themselves closing along “pure” gender lines or can embrace a complex combination of each (**Bem**, 1981). These possibilities allow individual differences to surface in the degree to which individuals adhere to masculine or feminine expectations, suggesting that anger and aggressiveness may be linked to the degree to which individuals believe that they currently possess socially appropriate sex role norms. Thus, we proposed the second hypothesis:

**Hypothesis 2:** Masculine persons report more anger and verbal aggressiveness than feminine persons do.

**Hypothesis 3:** Biological sex and gender interact so that (a) masculine males report more anger and verbal aggressiveness than do feminine males and (b) masculine females report more anger and verbal aggressiveness than do feminine females.

Given that social expectations manifest differently within individual psyches, we expected the variables that explain anger and verbal aggressiveness to differ among masculines and feminines, and thus, posed the second research question:

**Research Question 2 :** Do masculine persons and feminine persons differ with respect to the influences that contribute to their reported anger and verbal aggressiveness?

**Hypothesis 4:** Possessing masculine self-discrepancies is associated positively with anger and verbal aggressiveness.

**Hypothesis 5:** Possessing feminine self-discrepancies is associated negatively with anger and verbal aggressiveness.

### **SELF-AWARENESS.**

Self-awareness, is a perceptual process that involves focusing attention on one's self-concept (Duval & Wicklund, 1972; Fenigstein, Scheier, & Buss 1975, Fenigstein & Buss, 1974), which can be defined as the totality of one's thoughts and feelings towards oneself (Gecas, 1982; Rosenberg, 1979). Fenigstein et al proposed two types of self-awareness; private and public. Attention focused inward is private and allows for the detection of internal states. Attention focused outward is public and allows individual to realize their effects on others.

Although extant research has linked discomfort to aggressiveness, no detection mechanism has been advanced to explain how individuals come to perceive the discomfort. Private self-awareness may be one mechanism for detecting discomfort, suggesting that possessing a heightened sense of awareness of one's body and internal states may prompt aggressiveness if

one is experiencing a self-discrepant state (**Carver**, 1974, 1975; **Scheier**, 1976; **Scheier, Buss, & Buss**, 1978; **Scheier et al.**, 1974). Thus, we proposed the following:

**Hypothesis 6:** When an individual experiences discomfort such as that produced by self-discrepancies, private self-awareness is associated positively with anger and verbal aggressiveness.

Extant research suggests that social forces and other aspects of the environment can mold individuals' behaviour, especially when situational variables interact with psychological predispositions. To influence behaviour, stimuli in the environment must be recognized, at some level, by individuals. Public self-awareness is one mechanism that may allow them to be attentive to their own and other's action in social settings. Public self-awareness, then, may influence a propensity to be aggressive. Situations and expectations, that tend to decrease one's inhibitions toward aggressiveness (e.g. large crowds, anonymity, intoxication) may drive publicly self-aware persons to behave aggressively. In contrast, situations and expectations that tend to inhibit aggressiveness (e.g. being singled out, interacting with valued others) may drive the publicly self-aware to avoid aggressive behaviour. Thus, we proposed the following:

**Hypothesis 7a:** If an individual perceives him – or herself to be masculine, then public self-awareness is associated positively with anger and verbal aggressiveness; and

**Hypothesis 7b:** If an individual perceives him – or herself to be feminine, then public self-awareness is associated positively with anger and verbal aggressiveness.

**Table : Correlations between Self-Discrepancies and Verbal Aggressiveness (VA), Anger-Out (AO), and Anger-In (AI) Within Categories of Sex Crossed with Gender**

Self-discrepancy	Male participants						Female participants					
	High masculine			High feminine			High masculine			High feminine		
	VA	AO	AI	VA	AO	AI	VA	AO	AI	VA	AO	AI
<b>Masculine</b>												
Actual-ought	.09	.00	.00	.03	.21	-.03	-.01	.13	.13	-.04	.22*	.12
Actual-ideal	.07	.18	.27**	.26*	-.06	-.14	-.01	.08	.08	.03	.16*	.16*
Actual-important	.20*	.06	.17	.23	-.07	-.18	-.04	.09	.11	-.04	.11	.04
<b>Feminine</b>												
Actual-ought	.21*	-.23*	-.15	-.19	.01	-.17	.06	-.42***	.03	.22**	.14	.15
Actual-ideal	.00	-.23*	-.27**	-.18	-.01	-.21	.11	-.24-	.14	.15	.05	.23**
Actual-important	.15	-.22*	-.23*	-.29*	.07	-.36**	-.07	-.22*	.08	.04	.02	.05

**Table : Standardized Betas ( $\beta$ s) for Predictors of Anger-In Within Groups of Participants**

Predictor	Group				
	Total	Male	Female	High masculine	High feminine
<b>Block 1</b>					
Sex	-.02	NA	NA	-.10	.06
R <sup>2</sup>	.00	NA	NA	.01	.00
F	.05	NA	NA	.79	.27
Df	1,443	NA	NA	1,134	1,131
<b>Block 2</b>					
<b>Gender</b>					
Femininity	-.02	.16	-.18	.08	-.12
Masculinity	-.29***	-.22*	-.32***	-.65***	-.05
<b>Norms</b>					
<b>Actual-thought</b>					
Feminine	.03	.05	-.03	-.09	-.01
Masculine	-.03	-.18	.14	-.21	.17
<b>Norms</b>					
<b>Actual-ideal</b>					
Femininity	.05	-.11	.28	.04	.31
Masculinity	.28**	.20	.19	.16	.13
<b>Actual-important</b>					
Femininity	-.04	-.18	.01	-.02	-.30
Masculinity	.11	.01	-.16	.22	-.25
R <sup>2</sup>	.05**	.08	.09**	.08	.06
F	3.05**	1.76	2.95**	1.46	.99
Df	8,436	8,173	8,254	8,127	8,124
<b>Block 3</b>					
<b>Self-awareness</b>					
Public	.26***	.30***	.22**	.35***	.23*
Private	.08	.05	.11	.13	.04
R <sup>2</sup>	.14***	.16***	.11***	.20***	.12***
F	2,442	2,179	2,260	2,133	2,130
Df					
Total R <sup>2</sup>	.19***	.24***	.20***	.29***	.18**
Total F	8.44***	4.75***	5.69***	4.14***	2.26**
Df	11,433	11,170	11,251	11,124	11,121

**Table : Standardized Betas ( $\beta$ s) for Predictors of Anger-Out Within Groups of Participants**

Predictor	Group				
	Total	Male	Female	High masculine	High feminine
<b>Block 1</b>					
<b>Sex</b>	-.16**	NA	NA	-.06	.13
<b>R<sup>2</sup></b>	.02**	NA	NA	.00	.01
<b>F</b>	6.92**	NA	NA	.23	1.44
<b>Df</b>	1,443	NA	NA	1,134	1,131
<b>Block 2</b>					
<b>Gender</b>					
<b>Femininity</b>	-.16	-.17	-.09	-.24	-.09
<b>Masculinity</b>	-.32***	-.38***	-.30***	.38	.26
<b>Norms</b>					
<b>Actual-thought</b>					
<b>Feminine</b>	.00	-.06	.06	.06	.17
<b>Masculine</b>	-.01	.00	-.06	.10	-.21
<b>Actual-ideal</b>					
<b>Femininity</b>	-.01	.13	-.19	.05	.08
<b>Masculinity</b>	-.01	-.19	.14	-.40	.24
<b>Actual-important</b>					
<b>Femininity</b>	-.04	-.04	-.05	-.05	-.16
<b>Masculinity</b>	.00	.22	.00	.21	-.19
<b>R<sup>2</sup></b>	.13***	.15***	.12***	.07	-.06
<b>F</b>	7.50***	3.72***	4.49***	1.19	.99
<b>Df</b>	8,436	8,173	8,254	8,127	8,124
<b>Block 3</b>					
<b>Self-awareness</b>					
<b>Public</b>	.11*	.15	.09	.11	.21*
<b>Private</b>	-.09	-.25**	.03	-.34**	.00
<b>R<sup>2</sup></b>	.04**	.05*	.05**	.11***	.09**
<b>F</b>	6.13***	3.29*	4.64*	5.67***	4.54**
<b>Df</b>	2,442	2,179	2,260	1,133	2,130
<b>Total R<sup>2</sup></b>	.17***	.19***	.17***	.18**	.17*
<b>Total F</b>	7.38***	3.71***	4.67**	2.32**	1.98*
<b>Df</b>	11,433	11,170	11,251	11,124	11,121

The purpose of the present investigation was to assess the contribution of biological sex, gender, self-discrepancies, and self-awareness on anger-in, anger-out, and verbal aggressiveness. We theorized that the set of predictor variables would influence anger and verbal aggressiveness in two ways. First, they may be used as reference points or norms to guide behaviour. Second, they may be involved in the processing of incoming information and exert influence on perceptions and intentions that, in turn, influence behaviour.

Table summarizes the major findings of this study. Biological sex, gender, and self-awareness were associated uniquely with anger and verbal aggressiveness. Although those results are suggestive, a note of caution must be used during their interpretation. The magnitude of relationships uncovered was, in many cases, quite slight but statistically significant. This finding suggests that care must be taken not to place too much emphasis on any one result. However, as a set, the results support a slight general tendency consistent with the notion that individual differences affect anger and verbal aggressiveness uniquely.

Among the male participants in the present sample, (a) public self-awareness was associated positively with anger-in, (b) masculinity was associated positively with anger-out, (c) private self-awareness was associated negatively negatively with anger-out, (d) femininity and private self-

awareness were associated negatively with verbal aggressiveness, and (e) public self-awareness was associated positively with verbal aggressiveness.

Among the female participants in the present sample, (a) masculinity was associated negatively with anger-in, (b) public self-awareness was associated positively with anger-in, (c) masculinity was associated positively with anger-out, and (d) femininity was associated negatively with verbal aggressiveness.

The association between pure gender types, anger, and verbal aggressiveness was also elucidated. Among the high-masculine participants in the sample, (a) public self-awareness was associated positively with anger-in; (b) private self-awareness was associated negatively with anger-out and (c) biological sex, femininity, and private self-awareness were associated negatively with verbal aggressiveness. Among the high-feminine participants in the sample, (a) public self-awareness was associated positively with anger-in and anger-out, (b) biological sex and private self-awareness were associated negatively with verbal aggressiveness, and (c) public self-awareness was associated positively with verbal aggressiveness.

One conclusion to be drawn from these findings is that being male and subscribing to masculine norms in U.S. society may allow individuals to be angry and to express their anger toward others, whereas being female and subscribing to feminine norms in U.S. society may tend to inhibit the



expression of anger. Thus, biological sex and gender had a stronger influence on how anger and aggressiveness manifested in social contexts among the present U.S. college students.

## **IMPLICATIONS**

This study holds significant for areas of inquiry that are related theoretically to the reduction or elimination of anger and aggressive behaviour; violence intervention and prevention programs, appeasement and reconciliation strategies, and social skills.

Violence intervention and prevention programs such as peer mediation and conflict resolution (for a review, see Johnson & Johnson, 1966) attempt to change an individuals' behaviour through counseling, mediation and demonstrating the effects of violence on its victims. One result of violence intervention and prevention approaches may be a shift in attitudes and beliefs that may, in turn, lead to a decreased propensity to be aggressive. The results here imply that intervention and prevention programs may be improved by incorporating a broad array of techniques that account for the varying sources of types of aggressiveness found in the present study. For example, expressed anger (anger-out) and verbal aggressiveness were influenced by biological sex, gender, self-discrepancies, and self-awareness. According to these findings, intervention and prevention programs may enhance their effectiveness by taking into account those variables and by making aggressive individuals more aware of how those variables influence

their thoughts, intentions and actions. One avenue that may prove effective is to promote the incorporation of feminine concepts into the self-concepts of persons prone to become angry and aggressive and, at the same time, to link their existing masculine concepts (e.g. dominance) to negative outcomes. An example of the foregoing approach would be teaching people to value empathy and to devalue control in their relations with others.

**Mañu** (2001) suggested to use reality therapy of **William Ellaser** to control students aggression.

**Christa** (1999) wrote on "Reflections on Anger" Women and Men in a Changing Society". The article examines gender based anger in the context of changing gender roles

- Open expression of anger has increased
- Women do not suppress anger
- Destructive forces of anger are...
- Gender equality has increased the intimacy and conflicts, both
- Both, men and women experience confusion of gender roles.
- Women's expression of gender-based anger remains seriously under developed.

**RAMIREZ AND OTHERS (2001) RESEARCHED ON:- CULTURAL AND GENDER DIFFERENCES IN ANGER AND AGGRESSION: A COMPARISON BETWEEN JAPANESE, DUTCH AND SPANISH STUDENTS**

The research is part of a series of cross-cultural studies with the overall aim of investigating with biosocial processes, may be involved in aggression. This issue is complex because of its multiple causes (**Rafrez**, 1994, 1996a, 1998, 2000; **Ramfrez, Nakaya & Habu**, 1980). Aggression can be elicited by frustrating, or otherwise aversive, events (**Dollard, Doob, Miller, Mowrer & Sears**, 1939) and by the individual's disposition to react aggressively to such events. Ethnic and cultural differences may also influence the quality and level of this individual proneness. Individuals may differ in their proneness to particular kinds of emotional arousal, notably to anger. Most experimental research on anger has concentrated on its physiological indications (e.g. blood pressure) compared with those of other emotional states (**Ax**, 1953; **Schartz, Weinberger & Singer**, 1981; **Stemmler**, 1989), but little has been done to study the antecedents of emotional behaviour relevant to the incidence of anger, such as the possible relationship between aggression and individual proneness to anger. Our specific purpose was to determine whether there are any gender and cultural differences in this eventual relationship. One can assume the importance of biological characteristics, as well as of the sociocultural context, which

allows, encourages, or restrains the experience of anger and the expression of aggression by norms and values.

Measuring anger proneness at an individual level can be an important source of information for predicting intensity of anger and aggressive behaviour when a person is confronted with an anger-eliciting situation. A sample of 976 university students - 195 in Japan (48 male, 174 female), 551 in the Netherlands (187 male, 364 female) and 230 in Spain (56 male, 174 female) - read 17 vignettes depicting anger proneness, focusing on the frequency of experienced anger and of assertive and aggressive tendencies. In each hypothetical scenario, a valid representation of a real-life situation, we used the Anger Situation Questionnaire (van Goozen, Cohn-Kettenis, Goozen, Frijda & van de Poll, 1995; van Goozen, Frijda, Kindt & van de Poll, 1994; Van Goozen Frijda & van de Poll, 1994) to measure three dimensions of anger disposition: the emotional experience, the felt intensity of the emotional experience, and the action readiness in response to a number of common anger-provoking situations. We conducted statistical tests with rejection criteria of  $p < .05$  and  $p < .01$ .

Our data showed (a) that aggression resulted from the individual's disposition to react aggressively to the events described in the vignettes; (b) that anger proneness was not significantly different in two the two European samples that but that aggression proneness was significantly higher among the Japanese than among both European samples and was lowest among the

Spanish students; and (c) that there were no significant gender differences in any of the samples for aggression proneness and that anger was higher among the male participants than among the female participants only in the Dutch sample.

In spite of different levels of proclivity toward aggression (a product of some almost opposite cultural roles), Japanese and European anger proneness was not significantly different in the present research, as similarly argued elsewhere (Fujihara, Kohyama, Andreu & Ramfex, 1999; Ramfex, 1991, 1993; Ramfrez, Andreu & Fujihara in press Ramfrez & Fujihara 1997), differentiating feelings and attitudes toward interpersonal aggression.

Contrary to the predictions of some congruent gender differences - for instance, that women focus on emotional stimuli and become more upset by condescending and insensitive behaviour and that men are more likely to become angry in response to physical aggression or injury to another person (Harris, 1993; Ramfex, Fujihara, van Goozen & Santisteban, in press) - gender differences affecting anger disposition and arousal and aggressive tendencies were small or nonexistent in the present results, with the exception of the Dutch sample, in which the male participants showed significantly higher levels of anger.

**DAVID B. WOLF (2001) STUDIED "EFFECTS ON THE MAHA MANTRA ON SOME MENTAL HEALTH INDICATORS"** effects of the maha mantra. The dependent variables included some mental health, indicators, namely, verbal aggressiveness, spirituality, life satisfaction, stress, depression, well-being, sattva, rajas, and taumus. Five subjects were measured during a one-week baseline and a four-week intervention chanting phase. Results were in the direction predicted by Vedic theory. These findings suggest potential to the use of the maha mantra in social work practice in areas such as stress reduction and treatment for depression.


### **INTRODUCTION**

**Canda** (1988) emphasizes the importance for social workers to consider the spiritual needs of clients so that the fullness of the clients' human dignity and potential is recognised and respected in all helping situations. He asserts that spirituality is a basic aspect of human experience and that should be explored through social work practice and research. He appeals to social workers to consider spiritual issues when dealing with clients. Claiming that spirituality is common to all people, he asserts that it is relevant to all areas of social work practice, and calls for a spiritually aware social work profession. **Canda** also suggests that social work research, education and practice need to explore the spiritual dimension more fully. After an overview of Christia, Jewish, Shamanist, and Zen perspectives on social

work, **Canda** concludes that professional help can be enhanced significantly by the introduction of meditative techniques.

**Bullis** writes, "Traditionally, social work literature has reluctantly addressed religion's or spirituality's impact on clinical practice' (1996:6). He attributes to the historic rift between the religious and psychoanalytic movements, the alleged atheistic orientation of social workers, and economic, political and professional competition between religious professionals and secular social workers. **Bullis** continues, 'For the most part, spirituality in social work literature is conspicuous only by its absence' (1996:6).

**Keefe** (1996) considers Eastern-style meditative techniques as potentially important in social work practice and treatment, and described specific applications in treating depression, substance abuse, excessive anxiety, and development of social work skills in professional training. Many social workers have adopted a bio-psycho-social model in their practice, and **Keefe's** article provides a framework for progression to a bio-psycho-social-spiritual model as is being developed in nursing and medicine (**McKee** and **Chappel**, 1992). **Keefe** asserts that the potential of meditation in social work treatment and psychotherapy has already been recognized by some researchers and practitioners, and the meditative methods are natural adjuncts to social work intervention. He concludes that meditation 'has the potential to be valuable in work with clients from diverse cultures' (1996:451).



There has been considerable research on many meditative techniques including Buddhist approaches (**Kutz, Leserman, Dorrington, Morrison, Borysendo, and Benson, 1985; Sweet and Johnson, 1990**); mindfulness meditation (**Miller, Fletcher and Kabat-Zinn, 1995; Urbanowski and Miller, 1996**); and mantra meditation (**Janowiak and Mackman, 1994; Kaye, 1985**) with encouraging results on outcome variables such as stress (**Keefe, 1996; Janowiak and Hackman, 1994**), anxiety (**Delmonte and Kenny, 1995; Smith, Compton and West, 1995**), trauma recovery (**Urbanowski and Miller**), and empathy development (**Sweet and Johnson, 1990**). Since the study under discussion involves mantra meditation, a brief summary of the research on mantras is provided below.

**Janowiak and Hackman (1994)** conducted a three-group pre-test post-test experimental design with random assignment, with one group being a mantra-chanting group. This group showed a significant ( $p < .01$ ) increase in self-actualisation and a significant reduction ( $p < .01$ ) increase in self-actualisation and a significant reduction ( $p < .01$ ) in stress. For stress, **Janowiak and Hackman** obtained an effect size of 2.38 which indicates the magnitude of difference between pre-test and post-test mean scores for the mantra-chanting group, divided by the pre-test standard deviation. Further  $r^2$  for the correlation between stress and chanting compliance was 0.42. These effect sizes are larger than the effect sizes obtained for the group that



practiced a yoga relaxation technique. Rosenthal (1997) reports that a mean difference of 2.38 and  $r^2$  of 0.42 reflect very large effect sizes.

**Kaye** (1985) included chanting of the mantra 'Om' in an intervention package with elderly clients. In this qualitative study, **Kaye** reports that response to the chanting was very enthusiastic, and that the clients were enlivened by and looked forward to the chanting sessions. **Delmonte** (1983) conducted a literature review on meditative and mantra interventions. He concluded that the supposed 'mantra-person fit' advocated by some proponents of mantra meditation is not supported by empirical evidence. That is, the literature suggested that any sort of mental device, or mock-mantra, was as effective as the so-called genuine mantras. Outcome measures in his literature review included physiological indicators such as heart rate and blood pressure, as well as measures of anxiety.

**Canda** (1988) states that there are many potentially effective meditative practices that not have been applied in social work. In the Vedic literatures (**Prabhupada**, 1976) which are the source of many meditative techniques for enhancement of mental health, the maha mantra is postulated to be an especially effective technique of mantra meditation. No formal research has yet been conducted on the maha mantra, though some practitioners, including this author have used it.

This article describes a single-system study on the effect of the maha mantra. The hypothesis of this study were that chanting the maha mantra, which is the independent variable, would reduce the dependent variable of stress, depression, and verbal aggressiveness, and would increase the dependent variables of spirituality, satisfaction with life, and a sense of well-being.

Other dependent variables in this study included the Vedic-based constructs of sattva, or goodness; rajas, or passion; and tamas, or darkness. According to Vedic psychology, these three qualities, or modes of nature, comprise the psychological make-up of individuals. Sattva is characterised by qualities such as cleanliness, truthfulness, gravity, dutifulness, detachment, discipline, mental equilibrium, respect for superiors, sharp intelligence, sense control, and staunch determination. Attributes of rajas include intense activity, desire for sense gratification little interest in spiritual elevation, dissatisfaction with one's position, envy of others and a materialistic mentality. Qualities associated with tamas include mental imbalance, anger, arrogance, depression, laziness, procrastination, and a feeling of helplessness (**Dasgupta**, 1961). Sattva, rajas and tamas were measured in this experiment by the Vedic Personality Inventory (**Wolf**, 1999), which will be described in the sub-section on Outcome Measures. Hypothesis of this study related to these modes of nature and derived from Vedic theory (**Prabhupada**, 1976), were that chanting the maha mantra will increase sattva and decrease rajas and tamas.

## **METHODOLOGY**

### **SAMPLING**

The researcher placed advertisements in a student newspaper in a mid-sized town in the South eastern section of the United States. These ads announced that a study is being conducted on the Eastern-style intervention for relieving stress and depression, and that participants would be reimbursed monetarily. Twelve persons responded to the ads, out of which five did not respond to the researcher's attempts to contact them, after the initial discussion about their participation in the study. Another respondent explained that he was already chanting the maha mantra. As it would have been unethical to ask him to discontinue the chanting in order to obtain baseline data, this respondent did not participate in the experiment. Of the six remaining respondents, one filled out the packet of pre-test surveys, but did not respond to any further attempts to contact, leaving five participants in the study. All respondents read and signed a 'Consent Form for Participating in Research'.

### **DESIGN PROCEDURES**

This was an A-B-A withdrawal design, with the baseline and follow-up periods, each one week in length, and the intervention period lasting for four weeks. Subjects completed survey packages on Day 1, and at weekly intervals after that, for a total of seven data points during a six-week period. The second survey package was completed at the beginning of Week 2, just before the subject was instructed in the chanting intervention. One outcome

measure, the Self-Rated, Well-Being Scale, was a self-anchored scale, and was completed on every day of the study, from the beginning of baseline through the end of follow-up. Each participant received half the monetary payment at the beginning of the study, and half later the follow-up session.

The intervention is described as follows. The subject was given a string of 109 beads, known as japa beads, with one bead markedly larger than the others. The researcher instructed the client to chant mantras while counting the number of mantras chanted on the set of beads. Specifically, this method entails holding the bead on either side of the larger head with the thumb and middle finger of the right hand. While holding the bead, one should chant the maha mantra, which is composed of the following 32 syllables: hare krishna, hare krishna, krishna krishna hare hare, hare rama, hare rama, rama, rama, hare hare (pronounced 'ha're). After the mantra is completed, one should move one bead through the fingers so that the second bead from the large bead is now being held. Again one should chant the maha mantra. In this way, one mantra per bead should be chanted. This constitutes one round of japa. Japa can be performed in any circumstance. For instance, one may be sitting or walking. The essential factor is that one is fully attentive to the chanting. After teaching the subjects to chant, the researcher instructed them to chant three rounds of japa every day for the duration of the intervention period.

### **THE SPIRITUAL INVOLVEMENT AND BELIEFS SCALE (SIBS)**

This instrument was designed to create an assessment of spiritual status across religious traditions, and to assess actions as well as beliefs. The formulation of items involved input from persons of varied spiritual and cultural traditions. Designers of the scale sought an instrument that could integrate spiritual assessment into client care and research. The scale contains 26 items in a 5-point Likert format (**Hatchand** others, 1995).

**Cronbach's** alpha for the SIBS is 0.92, and 7-9 month test-retest reliability is 0.92. Also, the SIBS achieved a correlation score of 0.80 with the Spiritual Well-Being Scale (**Ellison** and **Smith**, 1991), a widely utilised tool in the field of spirituality research.

### **THE VEDIC PERSONALITY INVENTORY**

The VPI is an attempt to measure the three gunas, or modes of material nature, as described in the Vedic literature. According to the Vedas, all facets of material existence, including our mental processes, sound vibration, foods, disposition, and vocational choice, are permeated by the three gunas - sattva, rajas and tamas. Though there have been other attempts at guna inventories (such as **Das**, 1991; **Uma, Lakshmi** and **Parmeswaran**, 1971), the VPI is the most extensively tested among the guna scales, incorporating larger sample sizes and more elaborate statistical analyses (**Wolf**, 1998 and 1999).

The instrument contains 56 items, with the sattva sub-scale containing 15, the rajas sub-scale containing 19, and the tamas sub-scale, 22 items. There are seven Likert-type responses choices for each item. The VPI has been tested on 494 subjects, most of whom were medical professionals or university students. For the sattva sub-scale internal consistency alpha is 0.93, for the rajas sub-scale alpha is 0.94 and for the tamas sub-scale alpha is 0.94. Research revealed evidence for construct validity in the form of correlations between verbal aggressiveness and rajas, hours of sleep per day and tamas, and life satisfaction and sattva. These correlations were substantially stronger than correlations of any mode with the discriminant validity variables of gender, height, and number of siblings. With regard to factor analysis, all items correlate positively and significantly with their intended sub-scale.

### **THE GENERALISED CONTENTMENT SCALE (GCS)**

The GCS (**Hudson and Proctor, 1977**) measures the magnitude of non-psychotic depression, and consists of 25 items. It is a summated category partition scale that it scored on a range from 0-100. Positively and negatively worded items are used to counter response bias. Psychometric testing of the GCS was done on a sample of persons from diverse occupations. Test-retest and split-half reliability scores for the GCS ranged from 0.887 to 0.963, with a mean of 0.930. The instrument also helped to

differentiate between groups who described themselves as depressed and not depressed.

According to **Hudson** (1982), the GCS not only processes strong reliability and validity, it is also suited for repeated measures with the same client. Specifically, the GCS is short, easy to complete and score, and does not suffer from response decay when used repeatedly over time. For these reasons, the GCS has been chosen as a measure for this single-system design.

### **THE INDEX OF CLINICAL STRESS (ICS)**

This measure was designed to assess the subjective aspect of stress in a generalized, unidimensional form (**Abell**, 1991). The 25 items of the instrument were designed to reflect the range of perceptions involved with subjective areas. This approach to measuring stress is differentiated from stress measurement as a result of external life situation and life events. An internal approach to assessment of stress level is appropriate for mantra intervention, since chanting is hypothesised (**Prabhupada**, 1976) to alter one's consciousness or internal state.

Each ICS item has a five-point response range, with some items negatively worded to avoid response bias. Psychometrics of the instrument were assessed using a sample of 265 persons, whose mean age was 33 years. Cronbach's alpha for the sample was 0.963. the ICS has also shown strong

factorial validity, convergent construct validity and discriminant construct validity. Based on these results, **Abell** (1991) suggests that the ICS can be used with confidence by social work practitioners and researchers when single or repeated measures of subjective stress are required.

### **THE VERBAL AGGRESSIVENESS SCALE (VAS)**

**Infante** and **Wigley** (1986) describe aggressiveness as a personality trait that inclines persons to attack, the self-concept of other people. They developed a scale of 20 items, which was worked positively and half-negatively, to assess the construct of verbal aggressiveness. The rating format is a five-point linear scale with 'almost never true' and 'almost always true' as endpoints.

Reliability and factorial validity for the scale were tested on a sample of 636 students enrolled in introductory communication courses at large Midwestern state university. Alpha for the scale was 0.81, and test-retest reliability was 0.82. To test construct validity, the VAS was administered, along with seven other trait measures to 104 students. Results for all scales, compared with the VAS, were in the direction predicted by theory. Scales included the Social Desirability Scale, the Hostility-Gulf Inventory and the Feelings of Inadequacy Sub-Scale (**Infante** and **Wigley**, 1986).



### **THE SATISFACTION WITH LIFE SCALE**

This scale, which consists of five items and a linear response range with 'strongly disagree' and 'strongly agree' as the endpoints, measures global life satisfaction. Factorial validity and reliability for the SWLS were assessed on a sample of 176 undergraduates at a large Midwestern university. Two months after testing, 76 of the students were re-administered the scale. Test-retest reliability was 0.82 and coefficient alpha was 0.87. Eleven measures were administered to a sample of 339 undergraduates to test the construct validity of the scale. All results were in the direction predicted by theory, suggesting strong construct validity (**Diener and Others**, 1985).

### **COMPLIANCE LOG**

Subjects filled out a Chanting Compliance Log, and noted the number of rounds that they chanted each day. Though they were instructed to chant three rounds per day, the log indicated the actual frequency of chanting.

### **RESULTS AND ANALYSIS**

For the five subjects who completed the study, Table shows their mean scores for each outcome measure, as well as the Compliance Log score, which indicates the average number of rounds chanted per day. Average scores for each measure are listed for baseline, treatment, and follow-up phases.

To restate the research hypothesis, it was predicted that japa intervention will increase sattva, satisfaction with life, spirituality and well-being, and will decrease rajas, tamas, verbal aggressiveness, stress, and depression. Effects of japa were hypothesised to carry over to the follow-up period, though some loss of effects were predicted. Therefore, follow-up scores were hypothesised to reverse direction. For instance, japa intervention would predict an increase in sattva from baseline to intervention, and then a decrease from intervention to follow-up, although the final score at the end of follow-up would not be expected to be as low as the mean baseline score. Follow-up scores were not analysed in instances where baseline to treatment scores did not change according to the hypothesis (for an analysis of results, refer to Table 1).

### **SUBJECT A**

Analysing mean scores, with regards to research hypotheses, from baseline to treatment phases, subject A moved in the predicted direction on measures of tamas, satisfaction with life, stress, and well-being, and in a direction contrary to the research hypotheses for measures of sattva, rajas, verbal aggressiveness, depression and spirituality. For those measures that behaved in a way in accord with Vedic theory, follow-up measures also behaved in the predicted manner for three of four scales, with the exception being the Self-rated Well-being scale. Subject A was a middle-aged female

undergoing intensive treatments for an illness. She expressed an interest in meditation during her first discussion with us on the phone.

### **SUBJECT B**

From baseline to treatment, subject B's scores moved in the direction predicted by Vedic theory for measures of sattva, rajas, tamas, verbal aggressiveness, satisfaction with life, stress, and well-being, and in a direction contrary to research hypotheses for measures of depression and spirituality. For baseline to treatment measures that were in agreement with theory, the only follow-up mean score that was in the direction opposite to that predicted by theory was the measure for stress. Subject B was a female undergraduate university student in her early twenties. During our first conversation on the telephone, she mentioned that she had been experiencing a great amount of stress, and was interested in participating in the study in the hope that it would relieve her stress.

### **SUBJECT C**

From baseline to intervention, subject C showed changed in the direction predicted by the research hypotheses for all measures except rajas, which did not change. Follow-up scores were also in the direction predicted by theory. Subject C was a female university graduate student in her mid-twenties.

### **SUBJECT D**

From baseline to intervention, subject D showed change in the predicted direction for measures of sattva, rajas, tamas, verbal aggressiveness with life, depression, spirituality, and well-being. Follow-up scores showed change in the predicted direction for sattva, and well-being, but not for rajas, tamas, verbal aggressiveness, satisfaction with life, depression and spirituality. The average follow-up score for well-being was below the baseline score, and, thus, the drop in mean score was greater than the predicted by theory. Subject D was a female university graduate student in her mid-twenties.

### **SUBJECT E**

Scores for Subject E, from baseline to treatment, went in the predicted direction for all measures. Follow-up scores did not move in the predicted direction for any of the measures. Subject E was a female university undergraduate in her early twenties. During our initial phone discussion, she reported that she meditated silently.

### **ANALYSIS OF RESULTS IN RELATION TO MEASURES**

#### *Sattva*

The sattva scale behaved in accord with theory for four of the five subjects, from baseline to intervention. Of these, three subjects showed sattva follow-up scores that concurred with predictions.

### *Rajas*

Rajas scores, from baseline to intervention, behaved according to the theory for three of five subjects, with one subject showing no change. Only in one subject did the follow-up scores move in the direction predicted by theory.

### *Tamas*

Tamas scores moved in accord with research predictions for every subject from baseline to intervention, and with three of five subjects from intervention to follow-up.

### *Verbal Aggressiveness*

The measure for verbal aggressiveness moved in the predicted direction for four to five subjects from baseline to intervention, and for two subjects from intervention to follow-up.

### *Satisfaction with Life*

Satisfaction of life changed in the predicted direction for all five subjects from baseline to intervention, and for two subjects from intervention to follow-up.

### *Stress*

Stress scores changed in the predicted direction for four out of five subjects from baseline to intervention, and for two subjects from intervention to follow-up.

### *Depression*

Measures for depression behaved according to theory in three of five cases from baseline to intervention, and in one case from intervention to follow-up.

### *Spirituality*

Spirituality scores moved in the predicted direction in three cases from baseline to intervention, and in one case from intervention to follow-up.

### *Well-Being*

Self-rated well-being scores moved in the predicted direction for all subjects from baseline to intervention, and for three subjects from intervention to follow-up, though one of these follow-up scores moved too far in the predicted direction, with regards to the research hypothesis.

Altogether, from the baseline phase to the intervention phase, 36 out of 45 measures (80 per cent) moved in the direction predicted by theory. Of the 36 scores that behaved in accordance with Vedic predictions from baseline to intervention, 19 (52.7 per cent) responded according to the research hypotheses from the intervention period to the follow-up period.

## **DISCUSSION**

With 80 per cent of the measures responding according to the research hypotheses from baseline to intervention phases, this study provides some preliminary evidence for the efficacy of chanting the maha mantra on japa beads. Measures of well-being, satisfaction with life, and *tamas* responded particularly well to the intervention, though all measures behaved according to theoretical predictions in at least three of five cases.

According to Vedic theory (**Prabhupada**, 1972), which is the conceptual framework for this study, all sound vibrations are premeated by various combinations of the three modes of nature - *sattva*, *rajas* and *tamas*. A person is affected by the types of sound vibrations to which he or she is exposed to. Thus, a person who regularly associates with sound in the mode of *rajas* (passion) will develop rajasic attributes, which might be characterised by qualities such as intense activity and high stress. The maha mantra, according to Vedic theory, is completely in the mode of *sattva*. Therefore, one who chants this completely will exhibit sattvic symptoms, which include a decrease in *rajas* and *tamas*, as well as reduced verbal aggressiveness, stress and depression and increased spirituality, satisfaction with life, and a sense of well-being. Thus, Vedic theory provides a possible explanation for the results of this study (**Prabhupada**, 1976).

**Cook and Campbell** (1979) delineate threats to external validity, construct validity and internal validity. There was no random sampling and, therefore, the results cannot necessarily be applied to an outside population. The sample size was very small, and this reduced the generalisation of results. Another threat to external validity that is not controlled with this design is the interaction of selection of treatment. That is, those who chose to participate in the experiment may not be representative of any particular population with regard to their response to chanting. The monetary reimbursement is another threat to generalisability of results.

Construct validity refers to the extent that the design allows the researcher to study the effects of the intervention, rather than some artifact of the procedures. In this study, the experimenter's expectancies and biases are a potential threat to construct validity of the design.

Internal validity relate to the extent to which the design allows assessment of the casual relationship between the dependent and independent variables. In this study, there were no control or alternative treatment groups, and thus there is very little comparative basis for the results of the subjects who chanted the maha mantra. It is difficult to conclude with assurance that the intervention was the cause of change. Due to lack of controls, the researcher did attempt to minimise the effects of diffusion, as each subject was dealt with individually, not in a group, and the subjects, therefore, did not know the identity of other participants.



Other shortcomings of the study include the unequal length of phases and the insufficiency of baseline points for most measures. **Bloom, Fischer, and Orma** (1995) recommend that phases of a single-system design should be of equal length, to allow internal factors to influence phases equally. In this study, the baseline lasted for a week, as did the follow-up phase, though the intervention period lasted for four weeks. **Blom, Fischer and Orma** (1995) emphasise that baseline data should include enough data points to indicate stability. Except for the Self-Rated, Well-Being Scale, which included seven or eight data points, the other measures included only two data points.

Replication studies with various populations and in different settings could help to clarify the generalisability of the results of this study. Further, studies on the maha mantra that include random assignment and control groups will increase internal validity and help to assess the effects of this chanting intervention. Results of this single-system design are sufficiently encouraging to continue to explore the maha mantra with more sophisticated research methods. In particular, group studies on the maha mantra will benefit from including a placebo or alternate mantra intervention, in order to assess the validity of **Delmonte's** (1983) conclusion that any mental device, or mock mantra, will be as effective as a so-called genuine mantra.

Clinically, japa chanting of the maha mantra can be utilised by practitioners in a number of ways. From a behavioural perspective, the internal gratification provided by the maha mantra can be regarded as a consequence and maintaining condition for continuance of chanting. According to Vedic theory (**Praphupada**, 1972), the internal satisfaction provided by the mantra can serve as a replacement for behaviours produced a less satisfying type of gratification, and that also produce undesirable side effects.

In cognitive-behavioural therapy, a common process is thought stopping, wherein a person interrupts disturbing thoughts by uttering the word 'Stop'!. After disrupting the distressing thought, the client is recommended to think about something that competes with the disturbing thought (**Spiegler and Guevremont**, 1993). Chanting the maha mantra can be an effective positive replacement thought in the thought stopping process.

In many behavior therapy, such as medical applications, techniques like emotive imagery and diversion of attention are included in treatment packages (**Turk, Meichenbaur and Genest**, 1983).

These techniques can utilise the maha mantra as a response to compete with anxiety and other unfavourable emotional responses. The maha mantra, as a competing response, might be used in treating chronic pain as well as coping with painful medical procedures.

Though chanting the maha mantra does not require japa beads, the beads provide a means to quantify the number of times that the mantra is chanted. Additionally, usage of beads while chanting engages the sense of touch. According to the Bhagavad Gita (**Prabhupada**, 1972), the senses are centred around the mind, and therefore the more senses that are engaged in an activity, the easier it is for the mind to focus on that activity. Chanting the maha mantra is for the mind to focus and the sense of sound, and with japa beads, the sense of touch is also engaged. This facilitates focusing the mind on the sattvic vibration, and enhances the effect of the mantra. A practical application of this idea could help clients to stop smoking. Smoking involves the mouth and the fingers, as does the activity of chanting on japa beads. By engaging the same senses and organs in the process of chanting the maha mantra, a person may experience gratification that facilitates cessation of a less satisfying type of pleasure such as smoking.

**Keefe** (1996) asserts that social work and meditative interventions intersect at the common human experience of stress. He further maintains that meditation has immense potential as a clinical adjunct technique in the reduction of stress and anxiety. He postulates that these techniques can facilitate other social work skills, such as development of empathic skill.

Social work's emphasis on diversity is compatible with the variegated origins of meditative techniques. There has been increased skepticism

regarding the applicability of Western psychological constructs and approaches to Eastern-based approaches for explaining and understanding the psychology of indigenous peoples (**Gergen, Glulerce, Lock and Misra, 1996**). Therefore, a culturally sensitive perspective suggests research and development of techniques not derived from Western thought. Of course, an intervention such as the maha mantra will not be suitable for all practitioners and clients, but some practitioners may find japa chanting of the maha mantra to be a useful tool to help certain clients, and, therefore, further research of this methods may be beneficial for clients and the social work profession.

#### **MCQUAIDE (1998) REFLECTED ON WOMEN AT MIDLIFE**

The cultural narrative provided for women at midlife is either medical and menopause oriented - hot flashes, osteoporosis, heart disease, the estrogen replacement therapy decision - or socially devaluing - "empty nest," a fertility has been, abandoned for a younger woman, depressed. Without alternative images these demoralizing cultural stereotypes can become a self-fulfilling prophecy. The study discussed in this article investigated midlife experiences of a group of white women in the New York city area and identified factors associated with successful negotiation of midlife transformation. Although midlife was a challenging stage of life, 72.5 percent of the women studied described themselves as happy or very happy. Factors predicting well-being at midlife included an annual family income

above \$30,000 a confidante or a group of women friends, good health, high self-esteem, lack of self-denigration, high self-effectance, a benign superego, goals for the future, a positive life narrative, the belief that one has a right to a life, positive midlife role models, and positive feelings about one's appearance.

## **CONCLUSIONS AND IMPLICATIONS FOR SOCIAL WORK PRACTICE**

### **SOCIETY'S ATTITUDES**

First, social workers working with midlife clients should not adopt the negative stereotypes that currently prevail because of the lack of positive images of midlife women. To assume that midlife women are developmentally programmed to experience menopausal instability and depression or empty nest loneliness would be inaccurate and may lead to a self-fulfilling prophecy. Results of this study indicate, for instance, that menopausal symptoms of and the empty nest are irrelevant to well-being in midlife for certain women. Midlife, for white middle-class and upper middle-class women, at least, is not a time of torment. Most of the women participating in this study were satisfied with themselves and their lives. Despite their happiness, they did find it a challenging state of life. Almost three-quarters reported that they were happy, yet barely half that number reported that they were having an easy time coping. For some people, having stressors to cope with does not prevent them for being happy.

The women who reported most satisfaction with the 17 areas of their lives examined differed from those with the least satisfaction in a number of ways. Their annual family income was above \$30,000 (how much above \$30,000 did not seem to matter) they were healthy, and they were not involuntarily out of the labour force. Menopausal status and symptoms, caring for parents, an emptied nest, educational level, marital status, occupation, and feminism were not correlated to midlife well-being. It seemed that it was not so much that the women had but what they did with it that made the biggest difference to their well-being. If the woman was "blocked from being in the world" (through disability, poor health, involuntary unemployment, limited spending power), then she was less likely to be happy. "Being a player" seems to be critical to well-being. On a macro level, social work interventions that help women maintain their health and employment, avoid marginality and maintain an adequate income would benefit midlife women.

The most satisfied unanimously reported that this was the best or happiest time of life. They were actively participating in what the world has to offer and looking forward to a future filled with new opportunities of the past. Women not doing well yearned for earlier days when there was a sense of possibility - for a happy marriage, wonderful children, an exciting career. The present lacked a comparable sense of wonderful possibility. Opportunities in midlife were either invisible or inferior to those of earlier

days. The women lacked positive images for vision building or meaning making, and they were finding dreams from the past an ineffective solace. Social workers can help women by enabling their active participation in the world and helping them find a sense of meaning and opportunity in the world.

**“FEMALE GANG MEMBERS: A PROFILE OF AGGRESSION AND VICTIMIZATION”, WAS STUDIED BY CHRISTIAN E.MOLIDOR (1996)**

This article presents themes of female gang membership that emerged from in depth-structured interviews with 15 young women in a residential treatment facility. Demographic material, family structure, initiation rites, and criminal behaviours are examined. In addition, specific implications for social work practice and research are explored.

Researcher used to go out and find some girl and make sure she came back to the house with me after the school, and it didn't matter how the fuck I got her back there. (I'd) tell her there was a party, tell her there were drugs, tell her there was some boy there that liked her..... Then, when she got there, the guys would have sex with her whether she wanted to or not. Mostly Researcher just watch and laugh; sometimes he'd join in or have sex with himself.

- 16 –year-old female gang member

Serious criminal behaviour committed by female gang members has steadily increased over the past two decades and is becoming more common (**Campbell**, 1987; **Spergel**, 1992; **Taylor**, 1993). The number of serious crimes by teenage girls increased by more than 50 percent between 1968 and 1974; serious crimes by teenage boys increased less than 10 percent (**Campbell**, 1984). Between 1960 and 1978, arrests of girls younger than 18 years increased by 265 percent for all offenses and 393 percent for violent crimes; arrests of boys for violent crimes increased by 82 percent (**Giordano**, 1978). As female gang members became more liberated and independent during the 1980s, they took on roles more comparable to male gang members. According to **Taylor** (1993), "Female gang members now are hard-core and deadly" (p.45). **Fishman** (1992), who has studied female gang membership since the 1960s, reported, "female gang members today have become more entrenched, more violent, and more and more oriented to male crime (p.28).

Although statistics indicate that teenage girls are becoming more involved in serious criminal activity, female gang members have largely been ignored (**Chesney-Lind**, 1989; **Covey, Menard & Franzese**, 1992). The majority of material written about female gang membership is incomplete and outdated, most having been written in the 1970s or earlier. **Thrasher's** (1927) initial study of more than 1,000 Chicago gangs included only one page of discussion about female gang participation.



The extensive theories explaining male gang participation include poor economic conditions (**Perkins**, 1987; **Zatz**, 1987), drug use and marketing (**Spergel & Curry**, 1990), family dysfunction (**Teilmann & Landry**, 1981), peer pressure (**Campbell**, 1984; **Hagedorn**, 1989), and poor self-esteem (**Chesney-Lind**, 1989; **Huff**, 1990). Theories about female gang participation focus on girl's social ineptness, physical unattractiveness, or psychological impairments (**Bowker & Klein**, 1983; **Rosenbaum**, 1991; **Spergel**, 1992). "The bulk of the literature, then, has perpetuated the notion that personal maladjustments characterize the female delinquent" (**Giordano**, 1978, p. 126).

Because the literature presents the female gang members as secondary participants, no research has been conducted on the ecological factors surrounding their lives. This descriptive study explores the ecology of female gang participation to uncover themes from which to develop a comprehensive model. This article discusses the contextual factors that motivate girls to join a gang; the extent of the girl's criminal behaviour; and the physical, sexual, and psychological abuses the girls experience from other gang members. Implications for social work and future research are discussed.

## **METHOD**

### **STUDY DESIGN**

Data were obtained from a convenience sample of 15 female gang members. The young women, who were in a secure residential treatment facility in Texas, consented to participate in in-depth, structured interviews about their experiences in the gang. The interviews were done in the social work “cabin”.

### **PARTICIPANTS**

Of the 36 young women then living in the facility, 15 identified themselves as active members (had been initiated) of several diverse gangs across Texas and New Mexico. All 15 consented to being interviewed. Each had been out of contact with their gangs while in the facility but still considered themselves gang members. All had a record of one to six arrests for various criminal behaviours and had been sent to the facility either by their parents or by the state when custody had been taken away from their parents).

Six participants were white, five were Hispanic, three were African American, and one was American Indian. Their ages ranged from 13 to 17, consistent with the literature, which suggests that the majority of gang members are between ages 14 and 18 (Covey et al., 1992; Huff, 1990; Monti, 1993), although there is evidence that gang members are recruiting members as young as eight to 10 (Johnstone, 1983; Mc Kinney, 1988). One 14 year old confirmed the young age at which gang membership begins.

## **RESULTS**

### **EDUCATION**

One theme that emerged from the interviews is the lack of formal education. Because they were in the treatment facility, all of the young women participated in school. However, before coming to the facility, the young women were at least two academic years behind their peers. Only three had completed ninth grade. The young women showed a consistent pattern of falling through the cracks in the school system; most had a history of suspensions for fighting or drug or weapon possession on the school grounds. After their suspensions were completed, they never returned to school or were truant so often that they failed. Several had attended alternative schools or attempted home schooling, but the results were the same. Each had quit attending school and began to hang out with her gang on a daily basis with no follow-up by their parents or the school system.

### **DISCUSSION**

To view these young women as victim is justifiable. Most have been victims of violence and sexual abuse from parents and relative since early childhood. They have been victims of poor economic conditions and the cycle of poverty and of overburdened and understaffed school systems that have failed to recognize them as at risk. In addition, the young women have become victims of physical and sexual violence within their own gangs.

However, to view these young women only as victims is not accurate. Although the literature portrays female gang members as little more than sex objects, the role of teenage girls in gangs is evolving. They now are the perpetrators of serious crimes.

The stories of these young women are illuminating but represent the experiences of only 15 gang members incarcerated for asocial behavior. The themes of female gang membership in this article must be studied more extensively on a larger scale. Even so, the information collected from these young women gives context to female gang participation, challenges some commonly held assumptions about female gang behaviors, and may confirm the experiences of some social work practitioners working with teenage girls.

### **IMPLICATIONS FOR SOCIAL WORK**

The themes that emerged in this article have implications for social workers. First, social workers can develop school-based programs that encourage affiliation and membership that would substitute for gang membership. Such programs can include sports teams, art and educational groups, and peer-interest groups. By belonging to these alternative groups, teenage girls can establish their identity, gratify social needs, and increase their sense of acceptance and recognition by their peers.

Also, school systems have an obligation to create a safe environment in which students can learn. Program can be designed to monitor more closely the school buildings and the grounds for violence. Health, physical education, or specially designed classes can address and identify victims of physical, psychological, and sexual abuse. Social workers working with teachers can identify and treat the students while they are at school and report perpetrators to law enforcement agencies. This creates an environment of trust among a variety of systems.

Second, social workers need to focus prevention and intervention effort on younger children. By focusing on only the high school population, social workers will have missed the girls who have already become gang members. If the majority of hard-core gang members begin associating with gang at age 11 and drop out of school by the 10<sup>th</sup> grade, the programs must target elementary and middle school students.

Third, social workers need to direct intervention towards the family. This can be extremely difficult because families of gang members or juvenile delinquents are difficult to engage in treatment (**Spergel**, 1995). The families of the young women in this article were former or current gang members or single parents who were overwhelmed, addicted to drugs, or themselves abused. Often these families had no idea of the trouble their children were in or how to handle the situation if they found out.

Social workers can develop community-based parent-training classes and outreach programs. Helping parents acquire new skills can increase positive communication between them and their children and eliminate the need for their children to seek an alternative family. Also, in case in which children cannot continue to live with their families trained in special needs of at risk teenagers must be available.

Finally, all citizens have the right to live in their communities without the fear of being shot or stabbed. Community awareness of the ease with which weapons are available needs to increase. Legislators, working with law enforcement and other agencies, need to enact stricter laws that target those who distribute weapons, especially to minors.

**KEN-ICHI-OHBUCHI, TSUTOMU OHNO, HIROKO MUKAI (1994)**  
**STUDIED “EMPATHY AND AGGRESSION: EFFECTS OF SELF-**  
**DISCLOSURE AND FEARFUL APPEAL”.**

On the basis of familiarity – empathy assumption that self-disclosure evokes empathy for the speaker, it was predicted that a victim’s self-disclosure would inhibit aggression against the victim. Female Japanese subjects were asked to give electric shocks to a female victim who disclosed information about herself, was not given an opportunity to do so, or rejected disclosure. Independently of self-disclosure, another empathy arousal was introduced, that is, whether or not the victim expressed her fear of shocks before they

were delivered. Consistent with our hypothesis, subjects selected less severe shocks when the victim disclosed information about herself than when she was not given an opportunity to do so or when she rejected self-disclosure. The victim's expression of fear was also very effective in reducing subject's aggression, suggesting that drawing subject's attention to the victim's negative emotional state evoked empathy for her and reduced their aggression.

The subjects were 60 female Japanese university students taking an introductory psychology class.

When the subject arrived at the experimental room, she was met by a male experimenter and a female confederate who pretended to be another subject. The experimenter told both the subject and the confederate that they would participate in two independent experiments. The first was simulated interview whose ostensible purpose was to investigate the process of impression formation about a stranger. The experimenter assigned the role of interviewer to the subject and that of interviewee to the confederate. The experimenter provided the subject with a list of questions and requested her to ask them of the confederate.

Consistent with prediction, subjects reduced aggression when the victim disclosed information about herself before that section of the experiment in which shocks were administered. In contrast, they engaged in relatively

severe aggression against the undisclosing victim, irrespective of whether she rejected or was not given an opportunity for disclosure.

Familiarity with the victim, which was produced by her self-disclosure, would facilitate the subjects' empathy, thus leading them to reduce aggression against her.

In the present study the potential victim verbally expressed a fear of shocks, instead of expressing pain after the shocks. This procedure simulated a situation in which a potential victim uses his or her fear to appeal to an aggressor in order to avoid actual damage.

Found that such a verbal strategy was effective in reducing aggression, at least when the aggressor was not angered.

Self-disclosure did not increase liking, but rejection of self-disclosure decreased it. Recent research on self-disclosure does not always increase perceived attractiveness.

The subjects perceived the disclosing partner as more friendly, but they did not like that partner more than the undisclosing one. Miller (1990) concluded that whether or not self-disclosure increases perceived attractiveness depends on the relationship increases liking, but inappropriate self-disclosure does not. Self-disclosure by a stranger, just as in the present study, may not generally increase liking.



In this study, the confederate who rejected disclosure even when she was given an opportunity to do so was not liked by the subjects. However, the same confederate was not always negatively evaluated in the impression ratings. Although she was indeed perceived as an unfriendly person, she was also regarded as well controlled. Rejection of self-disclosure to strangers was positively evaluated as grave, careful, responsible and sensible.

**JONI BOYE BERMAN, KENNETH E. LEONARD, AND MARILYN SENCHAK (1993) had taken up a study on “MALE PREMARITAL AGGRESSION AND GENDER IDENTITY AMONG BLACK AND WHITE NEWLY WED COUPLES”.**

This study investigated the relationship between spouse gender identity and premarital aggression. A heterogeneous sample of black (n = 123) and white (n = 412) couples was assessed at the time they applied for their marriage licenses. Results suggested that gender identity might function as one component of the underlying mechanisms associated with intimate aggression. Further gender identity was differentially related to premarital aggression in the black and white samples. Femininity among white husbands seemed to temper aggression. Among black couples, wives high in masculinity or high in femininity, experienced lower level of premarital aggression.

The present analysis allowed for the identification of differences, which exist between these couples in addition to examining the relationship between husbands and wives gender identity and aggression.

There are clear differences between the black and white couples, which require consideration.

Only individual gender identities proved significant for discriminating aggressive from non-aggressive couples.

It appears that the conceptualization of gender identify as a bidimensional construct may be useful for understanding the relationship between gender identity and aggression.

Among white males, the level of femininity was significantly and negatively associated with the use of aggression.

The relationship between femininity and aggression is only evidenced in white males. The moderating effects of femininity do not seem to temper aggression among black males.

It has been posited that aggression represents a component of the masculine ideal and that men behave aggressively as one was of demonstrating their masculinity.

Found that black husbands with high scores on the Masculinity scale evidenced no higher level of aggression than those with low scores on the scale.

Among black couple the wives femininity and masculinity affected the reported level of aggression within their relationship, independent of the husbands gender identify because it appears that proficiency with regard to socioemotional and especially, instrumental qualities seems to “protect” black female from violence.

The highest levels of aggressions occur in black families in which the wife is low in both socio-emotional and instrument traits.

Result suggests that interpersonal competence during episodes of conflict may be important for black women.

Within-white couples, the gender identity of the wives had no effects on the level of femininity mitigates aggression the wives gender identity does not appear to act as a contributory or deterrent mechanism during intimate conflict. This suggests that while wives may depend on means other than gender-linked characteristics when confronted with conflict situation.

In sum, comparison of the relationship between gender identity and aggression within black and white couples suggests that even after

controlling for socio-economic disparity, there seem to be significant differences between the two groups.

Although there is a general lack of attention to both the similarities and differences between black/white differences within the material violence literature has been on differences in rates of aggression.

The precursors to aggression are more complex than can be captured by the analysis of isolated variables, which, in turn, indicates the continuing need to examine aggression within a more comprehensive framework.

This analysis examines only male to female aggression. Recent literature suggests that aggression within couples is reciprocal.

**JAN E. STETS (1992) STUDIED, “INTERACTIVE PROCESS IN DATING AGGRESSION : A NATIONAL STUDY”.**

This research examines the role of interactive processes in predicting physical aggression while dating using a national representative sample of young, never-married persons who date. The interactive processes of no consensus, and cognitive and expressive processes are examined. The findings show that during has to do less with individual's background characteristics and more to do with interaction patterns within relationships.

The data are based on telephone interviews with a national sample of respondents carried out in the fall or 1989. Dating respondents were

obtained using random digit dialing to insure a representative sample of the population. Eligible respondents consisted of never-married persons between the ages of 18 and 30. Daters aged 18 to 30 were examined because over half of the individuals who are single are between these ages.

A respondent had to have dated for at least 2 of the past 12 months and had to have had at least six dates with the same person.

Results show that these factors are important, particularly in explaining more persistent, recurring acts of aggression.

Aggression may be a one-time event, it may happen only a few times, or it may be a persistent pattern. This fact, together with the role that interactive features play in predicting aggression, help us to identify the case(s) of aggression and the different interpretations that can be made of aggression.

That interactive features help distinguish between infrequent and frequent acts of aggression. Lack of consensus in dating relationships influences the occurrence of one-time minor aggression, but it seems to have no influence on frequent patterns. Alternatively, cognitive and expressive processes of interaction influence frequent patterns of minor and severe aggression, but they tend not to influence the one-time occurrence aggression.

Aggression may occur once in a relationship due to a disagreement over some issue (for example, spending habits, when to have sex or planning the

future) that results in an uncontrollable, emotionally charged, aggressive response.

**MURRAY A. STRAUS AND STEPHEN SWEET (1992) studied,**  
**“VERBAL/ SYMBOLIC AGGRESSION IN COUPLES: INCIDENCE**  
**RATES AND RELATIONSHIPS TO PERSONAL**  
**CHARACTERISTICS”**

An important aspect of this study is that it based on a large and nationally representative sample of American couples.

The data were obtained by interviewing one partner each from current or former couples. Each respondent was asked to provide information on his or her own behaviour and that of their partner, as well as the characteristics of the couple such as length of the marriage.

Interviews with the 6,002 respondents were conducted by telephone in the summer of 1985.

To be eligible for conclusion, the respondent had to be age 18 or older and either

- (a) currently married,
- (b) currently living as man-woman couple or
- (c) a single parent with a child under 18 living with the parent, including divorced, separated or never married parents.

The response rate was 84%. Of the 6,002 respondents, 41.3% were men and 58.7% were women; 5,232 lived with a partner currently or within the previous two years, of whom 4% were cohabiting but not married and data from this group are reported here.

Further information on the sampling design and the characteristics of the sample is given.

Although the data were obtained from one partner only, the verbal aggression data are inherently information on interaction of the couple.

Physical aggression is held constant as a control variable; verbal aggression is very similar to physical aggression in its relationship to specified social psychological variables.

Verbal aggression does not serve as a replacement of physical aggression.

It can be seen as a part of a maladaptive behavioral pattern that is very similar to that of physical aggression in the family.

Like physical aggression there is a positive relationship between verbal aggression, drunkenness, and drug use.

Like physical aggression, the incidence of verbal aggression decline with increasing age of respondent and number of children in the family.

There is a high rate of verbal aggression in American couples.

**J.REID MELOY & CARL B. GACCONO (1992) studied, "THE AGGRESSION RESPONSE AND THE RORSCHACH"**

Researchers propose the addition of four aggressive indices for Rorschach scoring: aggressive content, aggressive potential, aggressive past and sado-masochism scores. Inter rater agreement is presented and ranges from 92 – 100%. Homothetic comparisons are made between groups with higher base rates for violence with mixed results, although the sado-masochism frequency was significantly higher in severe psychopaths than in moderate psychopaths. Idiographic use of aggression indices is emphasized, with a particular focus upon inferring the quality, intensity and directionality of intrapsychic aggression in relation of self and object representations.

Thirty Rorschach protocols of DSM-III-R Antisocial Personality Disordered (American Psychiatric Association, 1987) incarcerated adult males were randomly drawn from a larger subject pool (N=60). The aggression categories were independently scored by the two authors to determine inter judge reliability.

They compared the various indices of aggression between two groups of antisocial personality disordered (American Psychiatric Association, 1987) incarcerated males, all serving time for various felonies in California institutions. The two groups were divided into moderate psychopaths and



severe psychopaths, based upon scores from the Hare Psychopathy Checklist (Hare, 1980), a reliable and valid measure of psychopathy in criminal populations (Hare, McPherson & Forth, 1988; Schroeder, & Hare, 1983).

Various Rorschach indices of aggression appear less promising for nomothetic comparison of different groups than for the idiographic understanding of the quality, intensity, and directionality of aggressive impulses for a particular individual. Our findings of no significant differences between moderate and severe psychopaths on the aggressive scores, however, should be accepted with caution. Although samples of severe psychopaths have significantly greater histories of violence (Hare & McPherson, 1984) than moderate psychopaths, we had insufficient data to determine whether our two groups of offenders were significantly different in real-world violent behaviour.

The lesser mean amount of Aggressive movement (Exner, 1986) responses in psychopaths when compared to normal is not surprising because Meloy (1988) warned that the face validity of the Ag response may prompt the psychopath to disregard, and not verbalize, his Ag associations to the Rorschach. The ego syntonic nature of aggression and violence in psychopaths may incline them to recognize more easily social or clinical situations in which aggressive responding should not occur, leading them to censor their responses (Exner, 1986).

The psychopath's perception of aggression in an ambiguous stimulus situation like the Rorschach process also may not lead to a cognitively mediated associational link to aggression.

**PETER Y. CHEN & PAUL E. SPECTOR MADE AN EXPLORATORY STUDY ON "RELATIONSHIP OF WORK STRESSORS WITH AGGRESSION, WITHDRAWAL, THEFT AND SUBSTANCE USE (1992)"**

Based on the findings from the domain of organizational frustration, the conceptual similarity between stress and frustration, and the functional similarity between frustrated events and work stressors, the relationship of behaviours (aggression, withdrawal, theft and substance use) with work stressors and affective reactions were investigated. Relations between reported stressors and behaviours were strongest for the more directly aggressive actions (sabotage, interpersonal aggression, and hostility and complains), and for intention to quit. Relations with theft and absence were modest. None of the stressors correlated with reported substance use at work. Among the relations between affective reactions and the reported substances use at work. Among the relations between affective reactions and the reported behaviours, anger and job satisfaction correlated with all except substance use at work. Hierarchical regression results further showed that the observed associations between stressors and behaviours were not attributed to affective variable for most cases.

Four hundred employees from 14 sources volunteered to participate in the study. The majority of subjects were from central Florida. Out of the total number of respondents, 91 percent were full-time employees, 65 percent were females, and the median age was 37 years. Almost all respondents were white-collar employees, who covered a wide range of occupation including teachers, lawyers, editors, pharmacists secretaries, computer programmers, nurses, supervisors, accounts clerks, salesman, librarians, bank clerks, waiters/ waitresses, managers, navy officers and social workers.

Four out of five reported stressors correlated significantly with reported aggressive acts and their intention to quit. Second, affective reactions were related to the reported behaviours, with the exception of substance use at work.

Relations between stressors and reported behaviours were strongest for the more directly aggressive acts.

### **MOST STRESSORS ALSO RELATED TO THEFT AND ABSENTEEISM.**

Most affective reactions were significantly related to intention to quit and behaviours except substance use at work. Relations were strongest with interpersonal aggression, hostility and complaints, and intention to quit; with correlations as high as 0.62 (satisfaction and intention to quit). Relations of

anger with the aggressive behaviours were consistent with the frustration literature.

The lack of correlation between substance use at work and interpersonal aggression failed to support findings of alcohol effects on human aggression. Some work stressors may irritate employees and erode their coping abilities or influence choice/foci of coping strategies. Hence, some people may tend to employ either aggressive or withdrawal gestures to handle stressors in job settings.

**ROBERT J. JOHNSON & HOWARD B. KAPLAN (1988) made a study on “GENDER, AGGRESSION AND MENTAL HEALTH INTERVENTION DURING EARLY ADOLESCENCE”**

Researchers tested the hypothesized effects of aggression on observed higher treatment rates for male than female adolescents over three waves of a panel. On the assumption that treatment is a social control response to deviate behaviour, including aggression, researchers hypothesize that higher treatment rates for males are accounted for by higher rates of aggression by males. They also considered additional explanations such as the “value hypothesis” which states that male adolescents are more highly valued and thus are more likely to be treated for problems and the “tolerance hypothesis” which states that differential treatment rates vary by differential tolerance of deviance for males and for females. Findings suggest that initially observed gender differences in these treatment rates are accounted

for partially (seventh grade) or entirely (eighth and ninth grade) by increased likelihood of male aggression as measured by overt interpersonal aggressive behaviour. Little evidence is found to support the other explanations.

The data are taken from a 50 percent representative sample of a cohort of adolescents attending the seventh grade in Houston public schools in 1971. These young subjects were administered a questionnaire in 1971, 1972, and 1973. Of the 9,300 students in the target population, there were 7,529 respondents at Time 1 (T1). Fifty-one percent of these respondents were female. At Time 2(T2), there were 4,596 respondents who submitted usable questionnaires and had participated earlier. Fifty-four percent of these T2 respondents were females. At T3, 54.5% of the 3,795 respondents were females. Thus there is a slight increase in the proportion of females between T1 and T2 suggesting that males were more likely to become non-respondents.

Analysis of treatment by mental and social health professionals confirms the previously described pattern of higher treatment rates for male children and young adolescents and declining differences between the sexes as these young adolescents mature.

This behaviour is more likely to occur among male adolescent and accounts fully (or nearly so) for the gender differences in treatment. The failure of

aggression to account fully for earlier differences may be due to the restricted period of reporting for aggressive behaviour.

Both males and females were equally likely to receive treatment for emotional anger, annoyance or upset. Although girls have been reported to express somatic complaints, communicate illness, and accept the sick role more rapidly, subsequent treatment still may not be responsive to mental health problems; even pediatricians report that prevalence of emotional problems detected was higher in boys than in girls.

Tolerance for this behaviour was greater toward females than males in earlier years, but that as the adolescents entered a more masculine environment, tolerance for aggression, especially by males, increased and was likely to cause intervention. Because interpersonal aggressive problem behaviour continues to exert the same influence on the treatment rate, the decline in treatment rates over time is most probably due to a reduction in other stresses or problems among males and not to greater tolerance of this behaviour in an increasingly masculine environment. In other words, although the treatment rates for males decline during this maturation process, the influence of interpersonal aggression on treatment does not decline because interpersonal aggression seems stable, it cannot be seen to account for the decline over time in treatment rates, although it is observed to account for initial differences through early adolescent period there is no evidence that boys with conduct disturbances are likely to be referred for

mental health intervention when they are younger but are more likely to be dealt with in other ways for the same disturbances when they grow older.

**SMALL, GESSNER AND FERGUSON (1984)** designed a study to examine the relation of sex-role type of dysphoric mood and to the manipulation of dysphoric affect. Initially subjects completed a variety of measures yielding indices of dysphoria, anxiety and hostility. Androgynous persons reported the least dysphoria, anxiety and hostility. Subjects from the original sample who volunteered for the second part of the study were randomly assigned to the neutral or depression conditions of the Velten Mood Induction Procedure. Androgynous types again reported the least anxiety and dysphoria in the neutral type situation; however, when exposed to depressive stimuli, they showed greatest increase in dysphoria. Masculine-typed persons showed virtually no change in mood. These results lend strong support to the association of sex-typing with depression. In that the sex types were differentially susceptible to dysphoric mood.