

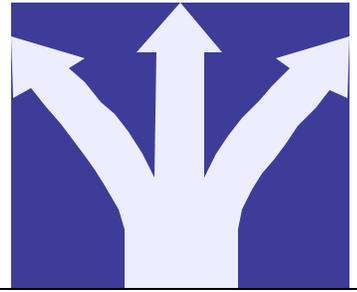
OUTLOOK ASSOCIATES

of New England

94 Pleasant Street, Arlington, MA 02476

781-643-5251

www.outlookassociates.com



Volume 5, Number 1

January 2005

Adolescents, Anger and Aggression (Part One)

School shootings such as Columbine, youth gangs and youth homicide are often what get the public's attention when there is a discussion about the level of anger and aggression among teenagers in our culture. Yet, there are clearly concerns about how many adolescents express their anger in even if it not lethal or causes serious bodily injury.

Definitions

To have a discussion about anger, it is important to clarify a couple of concepts. An explanation of anger that we use in our treatment of individuals with anger control problems defines anger as a *normal natural human emotion*. The emotion or feeling of anger is distinguished from the process of aggression which is how anger can be expressed. Aggression is defined as *any behavior that is harmful to one's self, others or the environment*.

Reactive vs Proactive Aggression

Psychologist Kenneth Dodge has also made a distinction between different types of aggression in his research with youth. He refers to those acts of aggression that are emotionally driven as *reactive aggression*. Acts of aggression that are more instrumentally driven (i.e. motivated by the potential for external reward) are *proactive aggression*. Dr. Dodge went on to conjecture that children may be inclined toward being either proactive or reactive with regard to their aggressive behavior. He cautioned that there are rarely pure types and noted that all behaviors have aspects of both reaction and proaction.

He indicated that proactively aggressive children tend to be bullies. Their aggression displays little observable emotion. They may be disliked by their peers, though often seem to have leadership qualities and an agreeable sense of humor. They experience their aggressive behavior as having a positive outcome

and they witness a great deal of violence among family, in the neighborhood and/or in the media.

According to Dodge, reactively aggressive children are the ones with hot tempers who appear to be instigated into anger and aggression at the slightest provocation. They are often disliked by their peers. They also tend to be hyper-vigilant and routinely misinterpret the intentions of peers as hostile.

Contributing Factors

As to why an adolescent may have more difficulties managing his/her anger and express it more aggressively compared to his or her peers is a question that has a number of answers.

One factor that may contribute to anger problems is co-morbid psychiatric conditions. Adolescents who have been diagnosed with attention deficit/hyperactivity tend to have higher levels of irritability. Also, adolescents who may be experiencing feelings of depression may act out intense feelings of emotional distress. In a study published by the Centers for Disease Control in 2004 based on 2001 data from a representative sample of American high school students, analysis showed that there was a high correlation for students reporting both a history of attempting suicide and participating in a fight.

Another element in dealing with adolescent anger problems is the impact of family dynamics. Ineffective parenting and supervision that consists of harsh, physical discipline and/or verbal abuse or an inability to provide effective fair limit-setting in a consistent manner will also increase the risk for adolescents to act out aggressively.

An outcome of psychiatric symptoms and/or problems in family dynamics is the adolescent having few skills to verbally express his/her feelings. In addition, the adolescent may not have a

(Continued)

repertoire of skills to handle conflict so his/her only alternative is to act out in an aggressive manner.

Further, as noted above, the adolescent may have what has been called an *hostile attributional bias*. That is, cues from the environment are cognitively processed as hostile or threatening and the adolescent then likely responds in an aggressive way. For example, Scott may be waiting in line to buy tickets at popular film. Another person his age may back up and accidentally step on his foot. Scott may interpret this action as intentional and make a negative comment to the person- "What's your problem!" The other person may ignore the comment which then confirms Scott's thinking that this individual was "testing" him. He then makes another derogatory comment or may touch the person in some way likely setting off a more direct confrontation that then re-enforces Scott's thinking about these types of interactions.

Peers and the Media

Two other points that need to be considered when discussing anger problems in adolescents are the role of peers and the influence of the media. Peers play an important part in an adolescent's life (Even if the adolescent may say that his/her friends have little influence). If the teenager associates with friends who engage regularly in aggressive behavior then he/she will feel the pressure to go along with the norm.

Also, what the adolescent is exposed to in terms of music, video games, TV shows and movies will often have an impact on their behavior. There is now substantial evidence to show that aggression portrayed in the media will contribute to violence. For instance, a study mentioned in the October, 2004 newsletter found that songs with violent lyrics consistently increased the number of aggressive thoughts among the participants regardless of musical style.

The next edition of the newsletter will discuss potential solutions to anger management problems in adolescents.

Sources of Information

1. Goldstein, S., PhD, Brooks, R., PhD, Weiss, S., M.Ed, Angry Children, Worried Parents, Seven Steps to Help Families Manage Anger. Specialty Press, 2004.*
2. Larson, J. & Lochman, J.E., Helping Schoolchildren Cope with Anger. Guilford Press, 2002.

* For a General Audience

FROM OUR FILES:

Children Who Are Bullied Are More Often Depressed and Suicidal

A study published in the June 2003 issue of *Pediatrics* indicated that bullied youngsters, especially girls, are far more likely than other children to be depressed and suicidal.

In a study of 4811 children between the ages of 9 and 13 years old, more than 40% of girls who were frequently hit, kicked, or called names said that they were depressed and almost 25% were said they thought about suicide.

The numbers were only slightly lower when more indirect forms of bullying occurred, such as ignoring, excluding, and backbiting. Among girls who were often the target of indirect bullying, 35.15 said they were depressed and 21.6% said they had suicidal thoughts.

Bullying also caused distress in boys. Among boys who were frequent victims of more direct forms of bullying, 22.4% said they were depressed and just over 13% said they thought of suicide. Just under 28% of those who were indirectly bullied reported depression and almost 18% said they thought of suicide.

(Reuters Health Information, June 2003)

Study: Preteen Girls More Likely to Retaliate after a Fight

In the June 2004 issue of the *Archives of Pediatric and Adolescent Medicine*, a study by researchers at the Children's Hospital of Philadelphia finds that girls ages 8 to 14 were more likely to retaliate after a violent incident.

The survey of 190 boys and girls brought to the hospital's emergency department for injuries caused by interpersonal violence found that most female-involved incidents were a recurrence of a previous fight.

In addition, most of the fights involving girls took place at home, whereas most of the fights among boys took place at school. Furthermore, a family member was more likely to intervene to stop fights between girls.

(Join Together Online, October, 2004)