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Understanding aggression

By Colin Maginn

“I’ve come to a frightening conclusion that I am the decisive element in the classroom. It’s my personal approach that creates the climate. It’s my daily mood that makes the weather. As a teacher, I possess a tremendous power to make a child’s life miserable or joyous. I can be a tool of torture or an instrument of inspiration. I can humiliate or heal. In all situations, it is my response that decides whether a crisis will be escalated or de-escalated and a child humanised or dehumanised.” Haim Ginott

This quotation by the late Haim Ginott, a teacher and psychologist, illustrates adults’ power over the children in their care. Using that power can either be a source of misery for the child or a force for good, making a child’s life joyous, providing inspiration, healing, de-escalating and humanising. The contrast between negativity from adults and showing emotional warmth and empathy to a child, is often the difference between getting a loving hug or facing aggressive behaviour from the young person in our care.

Empathy

The Cambridge dictionary defines ‘Empathy’ as: *‘the ability to share someone else’s feelings or experiences by imagining what it would be like to be in that person’s situation.’* Likely, as a foster parent, your empathy skills will be highly developed. It is also likely that a neglected, abused, traumatised young person will have lacked opportunities and the positive relationships to have developed their empathic skills. The good news is that recent research shows that *‘Such impacts may be substantively mitigated by always having support from an adult you trust in childhood.’*¹ This research by Bellis (et al.) (2017) established that a relationship with a trusted adult (they refer to as ‘Always Available Adult’) was the strongest component for the child to develop resilience.

If the ‘Always Available Adult’ is also fun to be with, is protective, warm, responsive and shows that they enjoy the child’s company, then the child will actively protect the relationship with the adult and become sensitive to the adult’s subtle social cues. This ‘attunement’, the reciprocation of sensitivity and responsiveness to each other, builds empathic skills. Empathy and the ability to attune to the other person’s feelings provide an almost perfect inhabitation to violent behaviour.

¹ Bellis MA, Hardcastle K, Ford K, Hughes K, Ashton K, Quigg Z, Butler N. Does continuous trusted adult support in childhood impart life-course resilience against adverse childhood experiences - a retrospective study on adult health-harming behaviours and mental well-being. BMC Psychiatry. 2017 Mar 23;17(1):110. doi: 10.1186/s12888-017-1260-z. Erratum in: BMC Psychiatry. 2017 Apr 13;17 (1):140. PMID: 28335746; PMCID: C5364707.

Aggression

As a foster parent, it would be helpful to understand the types and causes of aggressive behaviour and what triggers the young person in your care. For the child or young person reading this, you may be pleased to learn that research shows that violent video games are not associated with aggressive behaviour, see Przybylski and Weinstein (2019)². Although the two words 'violence' and 'aggression' are linked, violence involves physical assault; aggressive behaviour includes physical, verbal, psychological, social and other means of causing harm.

How you respond to a child in your care can de-escalate or trigger aggressive behaviour, this calls for self-awareness, reflecting on your behaviour and understanding what triggers you. To help minimise triggering aggressive behaviour, monitor your emotional state, spot when you become agitated or 'dysregulated' and find ways to ensure that you stay in control of your emotions and remain regulated in heated situations. Getting this right when dealing with younger children's aggression can break the child's pattern of behaviour, reducing future aggressive behaviour.

Some aggression is developmental; the terrible two's usually relates to a lack of verbal skills, causing anger and frustration that can drag on until the child is five or even older. Characterised by screaming, crying, hitting, kicking, biting, breaking and throwing objects., Table 1 shows that a response to 'irritable aggression' is attending to physical needs. A wise adult will also provide physical comfort with hugs and soothing words. Holding (to show warmth and affection, not restraint) the distressed child and gently rocking or walking with them also helps them to regulate.

While this glimpse of early childhood may not seem relevant to teenagers, it provides insights into the impact of Adverse Childhood Experiences (ACE) and the consequences of adults' responses to distressed children. How adults respond to toddlers distress will set up patterns of behaviour that are likely to be repeated into adulthood. For example, an adult responding to a distressed child by meeting their needs and helping them to become calm and relaxed will be a positive experience for the child. However, responding to a distressed child with anger, while distracted or unconcerned and failing to understand or provide for the child's needs, is likely to result in the child feeling rejected, angry and experiencing despair, and the child will develop strategies suited to the hostile world in which they find themselves.

Table 1 provides insights into the types of aggressive behaviour you may encounter in your parenting role, pointing to appropriate responses for each and ways to avoid or de-escalate these situations.

To quote from our book, Cameron and Maginn (2021) page 67 and 68.

*'In a heated situation that needs to be managed, parents and carers may find it useful to spot the type of aggressive behaviour they are dealing with as this can point to de-escalating strategies. The adults heightened emotions will make this difficult as the limbic system is preparing for fight or flight. Emotional competence at this point requires self-regulation (take slow deep breaths, hold each breath for two or three seconds, then slowly breathe out) or focus on a task that requires you to use your intellect (e.g., count slowly backwards from 10 to 1). Either of these will allow time for spotting what triggered the child's aggression and what type of aggression it is.'*³

² Przybylski AK, Weinstein N. (2019) Violent video game engagement is not associated with adolescents' aggressive behaviour: evidence from a registered report. R. Soc. open sci. 6: 171474. <http://dx.doi.org/10.1098/rsos.171474>

³ Cameron R.J. (Seán) and Maginn C. (2021) 'It's a privilege .. when a child in care is delighted it's you. Emotional Warmth Parenting for Fosterparents, Adoptive Parents and Children's home Staff' Published by the pillars of Parenting Publishing, Sunderland, U.K.

Table 1. Types of Aggressive behaviour and preventive or de-escalating strategies.
Adapted from Moyer (1968).⁴

Types of aggression	Preventive or de-escalating strategies
Fear-induced aggression: Fear triggers a fight, flee or freeze response in any scared animal. Even a mouse will attack (the fight response) if cornered and can't run away.	Avoid triggering fear, stay calm and regulated yourself. Raising your voice, blocking an exit from a room, taking an aggressive stance or posture, pointing, being negative or unkind can all trigger a fear response.
Inter-male aggression: This relates to mate selection in nature. The strongest male gets to procreate. Think about two rams banging heads together to assert dominance. Teenage boys may want to assert their masculinity with other males. Having a good relationship can help avoid this.	With inter-male aggression, have enough confidence in your masculinity to walk away. A female colleague or partner can usually diffuse the situation. In organisations such as police, a female officer is often used to deal with masculine aggression. If a female is not an option, you could use self-deprecating humour to poke fun at yourself.
Territorial aggression: People standing too close or infringing our territory. In nature, this includes protecting nests and marking territory with scent; an intruder is likely to be attacked if they get too close.	Be aware of the young person's space and avoid uninvited intrusions. Knock and ask before entering a bedroom. Identify, respect and protect the child's personal space and territory.
Irritable aggression: This can be triggered by pain, tiredness, heat, frustration or food deprivation. Lack of verbal skills in young children can cause frustration. Other less apparent triggers could be the hormonal imbalance with menstruation or the nagging pain from a toothache.	Attending to a child's basic needs for shelter, food, warmth, sleep, etc., can all help prevent irritable aggression. Ensuring that the young person engages in exciting and fun physical activities helps avoid feelings of frustration.
Learned or Instrumental aggression: Humans are intelligent, adaptive animals who learn quickly. One perhaps unfortunate learning experience is that the use of aggression can bring fast rewards.	As a balance to the fast rewards from aggressive behaviour is our need to belong and gain social capital from caring behaviour towards others. Teaching empathy and awareness of consequences can help as violent behaviour usually leads to legal sanctions.
Sex-related aggression: Rape and other forms of sexual assault are used to gain sexual pleasure, assert power, or achieve procreation against the will of the other party.	Young people who have been sexually abused may act out their sexual trauma with or against other young people. In your parenting role, it is essential to keep everyone safe with careful supervision and open communication.
Maternal and Paternal aggression: In nature, the protection of the young is necessary for survival and ensuring both physical and mental health.	This type of aggression can be triggered in both males and females if they perceive that a younger child is under threat. Such protective behaviour is welcome and often celebrated as defending our young from threats and danger is part of our nature.
Predatory aggression: Killing other animals for food.	In nature, the predator kills and eats another animal; an owl preying on mice for food. While the word 'predatory' is often misused, it is improbable that you will encounter 'true' predatory aggression in your parenting role.

⁴ Moyer, K. E., (1968) 'Kinds of Aggression and their physiological basis', *Communications in Behavioral Biology*. (2), 65-87.

Note: Moyer's original work was to show the role of aggressive behaviour as 'natural' and adaptive for survival. Here we have changed the order from frequent to less likely, to show which types of aggressive behaviour you are most likely to encounter in a parenting role. Knowing the child well and reading any given situation could help identify the type of aggression, giving pointers on the best way to prevent or de-escalate the aggression.

Looking at 'natural' aggression is not the whole story; some aggressive and violent behaviour may have more unexpected origins, such as mental illness, brain injury, the effects of drugs, or social aggression and aggressive behaviour related to loneliness.

Brain injury

Brain damage is one example; while researching for this article, I was surprised to learn that: '*In two classic studies of 15 adults and 14 juveniles on death row in the mid-1980s, psychiatrist Dorothy Otnow Lewis found all 29 inmates had a history of traumatic brain injury.*'⁵ In neuroscience, it is known that damage to the brain's frontal lobes can result in uninhibited aggressive and sexual behaviour.

From the perspective of being the person in a parenting role, it is well worth researching the young person's medical history for evidence of head trauma and prenatal records for maternal trauma or drug use. One example here is the brain damage caused by consuming alcohol during pregnancy. Fetal alcohol syndrome is an underdiagnosed condition.

Drug-induced aggression

Another type of aggression is 'drug induced' aggression. Here too, alcohol is known to reduce inhibitions; unfortunately, these are not just social inhibitions. It would seem that the more we drink, the more likely we are to behave violently, as any police officer on duty on a Friday or Saturday night in any UK city, will confirm.

It's not just alcohol that can trigger aggressive and violent behaviour; other drugs such as anabolic steroids, cocaine, amphetamines, sedatives, opiates, and hallucinogens, have all been associated with aggressive behaviour.

Social Aggression

With some aggression, there is no physical contact; however, neuroscience has established that no physical contact is needed to cause damage; Dr Martin Teicher's work⁶ confirms that even 'name calling' can damage the child's developing brain. Another example is the impact on children of 'Parental Rejection.' It is devastating for a child to feel rejected by the very people who should love and protect them.

⁵ Reiter. E and Pollack, D. (2020) 'Fraught With Fright: Legal Perspectives of Trauma - Attorneys need to know the various signs, symptoms and treatment modalities associated with trauma to properly represent their clients. Texas Lawyer

⁶ Teicher MH, Samson JA, Polcari A, McGreenery CE. Sticks, stones, and hurtful words: relative effects of various forms of childhood maltreatment. *Am J Psychiatry*. 2006 Jun;163(6):993-1000. doi: 10.1176/ajp.2006.163.6.993. PMID: 16741199.

We live in a violent world

The issues and types of aggression listed in this article are by no means exhaustive. Watch the news on any evening to see examples of economic, social, cultural, tribal, gang, religious, and nationalistic aggression (to name only a few) often this leads to violence and even war. Sadly the lesson to our children is not a good one; 'might is right' as the most powerful usually win.

Listening works

Using Moyer's types of aggression can help show the 'natural' origins of aggression, like fear or an intrusion, which is helpful to know so that we can respond appropriately. As we can see from some of the other types of aggressions listed above, this is complex. Each person is unique, and no two people have the same kaleidoscope of experiences. Our backgrounds, trauma history, how we have been supported or exploited all have an impact on how we respond to triggers.

Having a structure (as in table one) was a useful tool in my work in two different young people's secure units in England (one in Manchester and the other in London). What was even more effective was spending time with each young person when they were admitted to the secure unit, listening to their stories and finding out about the good times as well as the issues in their lives and responding with empathy. This showing concern and interest in the young person positively affected how we related to each other. When incidents did occur, mutual trust, respect and good humour played an important role in ensuring that incidents were quickly de-escalated.

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The Pillars of Parenting Ltd,
Business & Innovation Centre,
Wearfield, Sunderland, SR5 2TA.
www.pillarsofparenting.co.uk
e-mail colinmaginn@pillarsofparenting.co.uk
Tel: +44 (0)191 516 6634 or +44 (0)7983 544899

