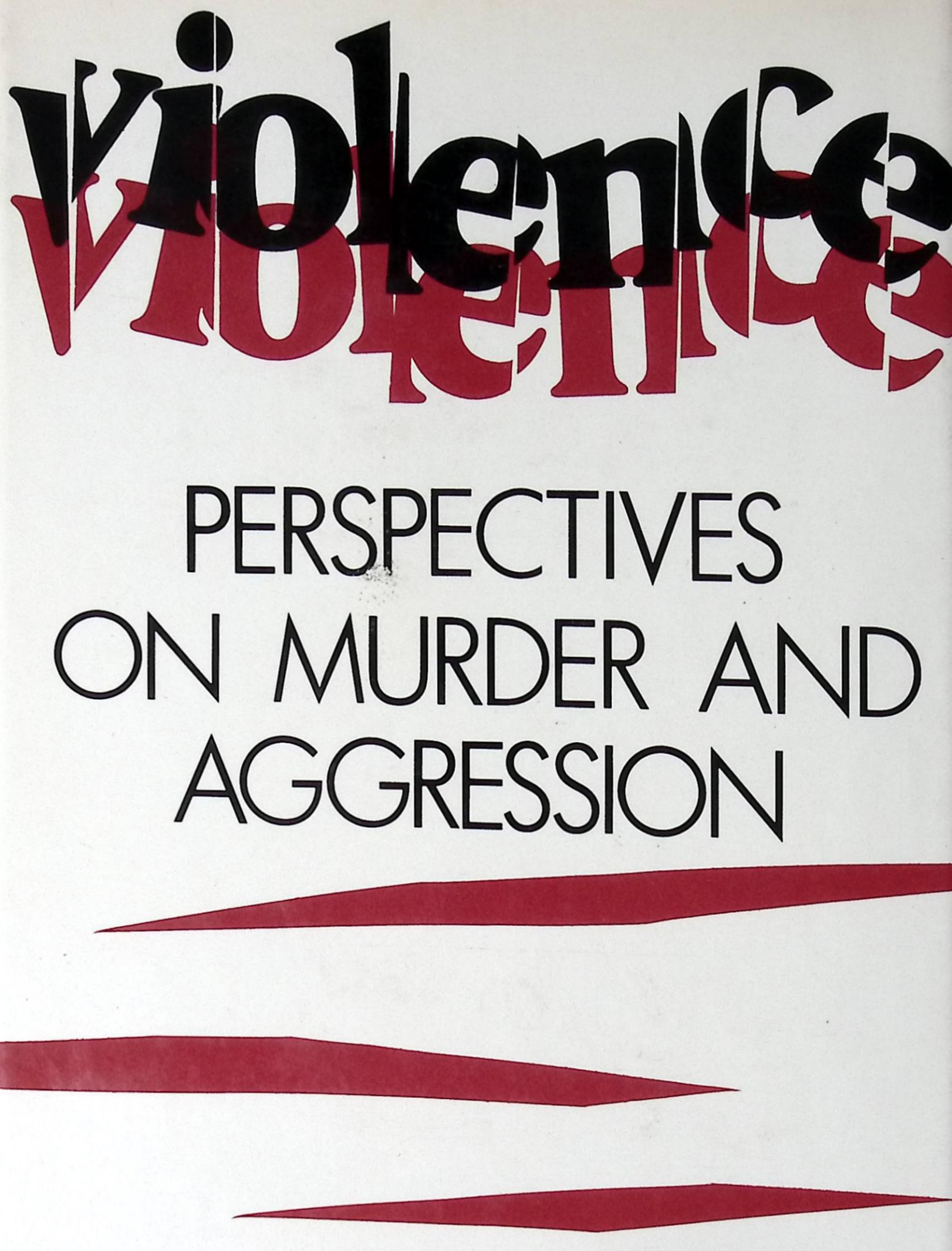


# violence

The word "violence" is written in a large, bold, black, lowercase sans-serif font. Directly beneath it is a red shadow of the same word. Below the shadow are three horizontal red brushstrokes of varying lengths and orientations, creating a sense of movement or impact.

PERSPECTIVES  
ON MURDER AND  
AGGRESSION

Irwin L. Kutash, Samuel B. Kutash,  
Louis B. Schlesinger, & Associates

A new book in  
THE JOSSEY-BASS  
SOCIAL AND BEHAVIORAL SCIENCE SERIES

# Violence

## PERSPECTIVES ON MURDER AND AGGRESSION

In recent years, examples of violence and aggression—prison riots, bombings, terrorist attacks, assassinations—have been widespread, and today 1 out of every 10,000 deaths in the United States is the result of murder. Yet, despite the presence of violence everywhere, who really understands it or knows what to do about it? *Why are people aggressive? What leads them to murder? Why do parents abuse their children? Is violent behavior instinctive or learned? How should violent individuals be treated? Can violence be predicted, controlled, or—better yet—prevented?*

This new book investigates these and other pertinent questions. In twenty-six chapters, the authors provide case study material and numerous clinical examples that professionals will find useful in dealing with such problems as child abuse, school violence, and sexual offense. They offer practitioners in psychology, psychiatry, sociology, and other disciplines the most up-to-date, comprehensive overview available in one source of the causes, treatment and prevention of violence. They present theories from several schools of thought—biological, sociological, ethological, psychoanalytical—about the origins of aggressive behavior. They examine the causes and the consequences of different kinds of murder, such as intrafamilial and political. The authors discuss why people become violent and how that violence erupts into family assaults, vandalism

(continued on back flap)

0002 6368



100

100 000

100 000

100 000

100

100 000

100 000

100 000

child abuse, and other destructive acts. They look at what is being done, what can be done, and what should be done for the victims of violence, as well as with the offenders themselves. And they demonstrate the vital role of societal intervention and of educating the public in long-range violence prevention.

Clearly, we must continue to work toward controlling violence; but before we can really solve the problem, we need to know more about it. This new handbook addresses that need by offering practical information that represents a wide range of viewpoints. It will serve as an invaluable guide for those who work with violent offenders and their victims and for all who wish to broaden their understanding of human aggression.

#### *THE AUTHORS*

IRWIN L. KUTASH is chief, Alcohol Rehabilitation Program, coordinator, Psychology Training, and chairman, Behavioral Sciences Council, Veterans Administration Hospital, East Orange, New Jersey.

SAMUEL B. KUTASH is professor of psychology, Graduate School of Applied and Professional Psychology, Rutgers University, and director, New Jersey Division, New York Center for Psychoanalytic Training, New York City.

LOUIS B. SCHLESINGER is coordinator, Violence Clinic, Veterans Administration Hospital, East Orange, New Jersey, and psychological consultant, Fair Oaks Hospital, Summit, New Jersey.

The other authors are identified in the front of the book.

JACKET DESIGN BY WILLI BAUM



**JOSSEY-BASS PUBLISHERS**

433 California Street, San Francisco 94104  
28 Banner Street, London EC1Y 8QE

# VIOLENCE



*Perspectives  
on Murder  
and Aggression*



**Irwin L. Kutash,  
Samuel B. Kutash,  
Louis B. Schlesinger,  
and Associates**



**Foreword by Alexander Wolf**

# VIOLENCE



## *Perspectives on Murder and Aggression*



Jossey-Bass Publishers  
San Francisco • Washington • London • 1978

**VIOLENCE**

***Perspectives on Murder and Aggression***

**by Irwin L. Kutash, Samuel B. Kutash, Louis B. Schlesinger,  
and Associates**

**Copyright © 1978 by: Jossey-Bass, Inc., Publishers  
433 California Street  
San Francisco, California 94104  
&  
Jossey-Bass Limited  
28 Banner Street  
London EC1Y 8QE**

**Copyright under International, Pan American, and  
Universal Copyright Conventions. All rights  
reserved. No part of this book may be reproduced  
in any form—except for brief quotation (not to  
exceed 1,000 words) in a review or professional  
work—without permission in writing from the publishers.**

**Library of Congress Catalogue Card Number LC 78-62555**

**International Standard Book Number ISBN 0-87589-388-0**

**Manufactured in the United States of America**

**JACKET DESIGN BY WILLI BAUM**

**FIRST EDITION**

***Code 7828***

***The Jossey-Bass Social and  
Behavioral Science Series***





# Foreword



Aggression, violence, and murder—and how to deal with them—are among the major concerns of society. A well-planned, complete sourcebook on these topics has been long overdue, and thus this impressive volume fills an important need. The editors and their associates, who have contributed original chapters in their areas of expertise, have produced a book that brings together the most up-to-date and relevant viewpoints on aggression, violence, and murder. Everyone concerned with the age-old problem of violence and its prevention—including those who are designing research and diagnostic and treatment plans—will find it a valuable contribution.

By selecting such an outstanding and diverse group of authors, the editors help us see the numerous possibilities that contribute to pathological aggression. The variety of areas explored might lead some readers to wonder if there is even more

chaos in society than they had believed possible. But the editors, by their selection and organization of the material presented in this book, and through their introductions to each part, have managed to impose an order, organization, and structure on the broad and multifaceted origins of pathological assault. They are to be congratulated in this endeavor, which succeeds in providing readers with the background and tools they need for their own research and clinical work on problems of aggression.

As a psychoanalyst with views somewhat limited to my specialty, I am particularly impressed that the editors, themselves analysts, were able to select knowledgeable experts with such a range of perspectives on the origins of aggression, violence, and murder. In one comprehensive volume, they have included material on the multiple motives for pathological activity and have produced a vast complex of pertinent information. The ultimate synthesis, which at some time in the future may enable the world to live in peace, has yet to be realized, but this book contributes greatly to attempts to better understand and deal with human aggression and its pathological manifestations.

In our therapeutic sanctuaries, mental health professionals try to help the aggressive, the violent, and the murderous achieve their ends by more peaceful means. We have been asked how we can extend our professional skills from the treatment room to resolve violence in the world at large—between ethnic and nationalistic groups, among terrorists and tyrants, between street gangs, and between warring factions. The following pages represent the most successful attempt to date to answer that question.

The editors are well qualified for the massive undertaking that resulted in this excellent volume. They have modestly left unrevealed their special qualifications, and something needs to be said in their behalf. Unfortunately, I can mention here only a few of the related activities that led them to undertake this particular task.

Irwin L. Kutash worked for many years on the forensic unit at the Central Islip State Hospital in New York and has participated in many important murder cases. With Louis B. Schlesinger, he contributed a searching article, "Successful Psychological Defense: Probing the Defendant's Mind" (1977). In his current roles as chief of the Alcohol Rehabilitation Program at the East Orange Veterans Administration Hospital, New Jersey, as consultant to the Cedar Grove residential treatment

center for disturbed and delinquent adolescents, and in private practice, he has engaged in a subspecialty—that of treating the victims of aggression. From this experience he developed the original classification system and treatment approaches presented in this book.

Samuel B. Kutash served as chief psychologist at the Woodbourne Institution for Defective Delinquents and the Harlem Valley State Hospital, both in New York. He frequently was called on to testify in cases of violence and served as consulting psychologist in criminal trials. For a number of years he served as a top consultant and as a field selection officer in the U.S. Peace Corps. He was co-editor of the *Encyclopedia of Criminology* and served as associate editor of the *Journal of Criminal Psychopathology* and the *Archives of Criminal Psychodynamics*. He is currently in private practice and a professor, and he has maintained a strong interest in criminal psychopathology. He is the author of a number of original articles dealing with the criminal mind. His conceptualization of “aggression in the service of the ego” distinguishes between benign, adaptive aggression and malignant aggression.

Louis B. Schlesinger has worked at the New Jersey Diagnostic Center, Trenton State Prison, and the Trenton Psychiatric Hospital, Vroom building, New Jersey with sex offenders, murderers, and the criminally insane. He is presently coordinator of the Violence Clinic at the East Orange Veterans Administration Hospital, New Jersey. In his private practice, he specializes in forensic psychology, which frequently involves him as a consultant in court cases relevant to the issues raised in this volume. In these settings, he developed his conceptualizations of homicidal personality types. With Irwin L. Kutash, he is completing Standardization of their Criminal Fantasy Test which is proving of great utility in accessing normal as well as criminal personalities.

I am gratified that at last we have a foundation volume, multidisciplinary and comprehensive in scope, that will be useful to all serious students of this greatest of enigmas—the problems of human aggression and inhumanity and what could be our undoing in this atomic age. My forty years of professional work in the field of psychoanalysis in groups enables me to testify to the importance of communication in resolving misunderstandings and to the ill effects of repressed anger and other underlying psychodynamic causes of pathological aggression. The promotion of communication among therapists, re-

chaos in society than they had believed possible. But the editors, by their selection and organization of the material presented in this book, and through their introductions to each part, have managed to impose an order, organization, and structure on the broad and multifaceted origins of pathological assault. They are to be congratulated in this endeavor, which succeeds in providing readers with the background and tools they need for their own research and clinical work on problems of aggression.

As a psychoanalyst with views somewhat limited to my specialty, I am particularly impressed that the editors, themselves analysts, were able to select knowledgeable experts with such a range of perspectives on the origins of aggression, violence, and murder. In one comprehensive volume, they have included material on the multiple motives for pathological activity and have produced a vast complex of pertinent information. The ultimate synthesis, which at some time in the future may enable the world to live in peace, has yet to be realized, but this book contributes greatly to attempts to better understand and deal with human aggression and its pathological manifestations.

In our therapeutic sanctuaries, mental health professionals try to help the aggressive, the violent, and the murderous achieve their ends by more peaceful means. We have been asked how we can extend our professional skills from the treatment room to resolve violence in the world at large—between ethnic and nationalistic groups, among terrorists and tyrants, between street gangs, and between warring factions. The following pages represent the most successful attempt to date to answer that question.

The editors are well qualified for the massive undertaking that resulted in this excellent volume. They have modestly left unrevealed their special qualifications, and something needs to be said in their behalf. Unfortunately, I can mention here only a few of the related activities that led them to undertake this particular task.

Irwin L. Kutash worked for many years on the forensic unit at the Central Islip State Hospital in New York and has participated in many important murder cases. With Louis B. Schlesinger, he contributed a searching article, "Successful Psychological Defense: Probing the Defendant's Mind" (1977). In his current roles as chief of the Alcohol Rehabilitation Program at the East Orange Veterans Administration Hospital, New Jersey, as consultant to the Cedar Grove residential treatment

center for disturbed and delinquent adolescents, and in private practice, he has engaged in a subspecialty—that of treating the victims of aggression. From this experience he developed the original classification system and treatment approaches presented in this book.

Samuel B. Kutash served as chief psychologist at the Woodbourne Institution for Defective Delinquents and the Harlem Valley State Hospital, both in New York. He frequently was called on to testify in cases of violence and served as consulting psychologist in criminal trials. For a number of years he served as a top consultant and as a field selection officer in the U.S. Peace Corps. He was co-editor of the *Encyclopedia of Criminology* and served as associate editor of the *Journal of Criminal Psychopathology* and the *Archives of Criminal Psychology*. He is currently in private practice and a professor, and he has maintained a strong interest in criminal psychopathology. He is the author of a number of original articles dealing with the criminal mind. His conceptualization of “aggression in the service of the ego” distinguishes between benign, adaptive aggression and malignant aggression.

Louis B. Schlesinger has worked at the New Jersey Diagnostic Center, Trenton State Prison, and the Trenton Psychiatric Hospital, Vroom building, New Jersey with sex offenders, murderers, and the criminally insane. He is presently coordinator of the Violence Clinic at the East Orange Veterans Administration Hospital, New Jersey. In his private practice, he specializes in forensic psychology, which frequently involves him as a consultant in court cases relevant to the issues raised in this volume. In these settings, he developed his conceptualizations of homicidal personality types. With Irwin L. Kutash, he is completing Standardization of their Criminal Fantasy Test which is proving of great utility in accessing normal as well as criminal personalities.

I am gratified that at last we have a foundation volume, multidisciplinary and comprehensive in scope, that will be useful to all serious students of this greatest of enigmas—the problems of human aggression and inhumanity and what could be our undoing in this atomic age. My forty years of professional work in the field of psychoanalysis in groups enables me to testify to the importance of communication in resolving misunderstandings and to the ill effects of repressed anger and other underlying psychodynamic causes of pathological aggression. The promotion of communication among therapists, re-

searchers, and practitioners of diverse viewpoints, made possible by this book, offers the possibility of finding solutions, in theory and practice, for the problem of human violence.

*New York City*  
*August 1978*

Alexander Wolf, M.D.

# Preface



The problem of violence and aggressive behavior has been with us throughout human history and has been recorded prominently from the Bible to today's newspaper. Aggressive behavior is found in the most primitive forms of life and in the most sophisticated, and all complete theories of human personality emphasize the aggressive component. From Cain to Lee Harvey Oswald, cases of murder have been prominent. And yet, to quote Karl Menninger (in Halleck, 1967), "We still don't know how to protect Abel and we still don't know what to do with Cain."

Almost every significant event in history—the religious crusades, world wars, revolutions, assassinations—has had something to do with violence and aggression. According to Baron (1977), 5,600 years of recorded history have produced more than 14,600 wars—"a rate of approximately 2.6 wars per year."



Of the roughly 185 generations of human beings, only ten seem to have known the blessings of uninterrupted peace.

Today—in spite of all our efforts—violence, murder, and aggression are still poorly controlled, not well understood, and increasing. We are indeed in an “age of violence.” An international network of terrorists threatens not only individuals and groups of people but even national governments. In the United States, one out of every 10,000 deaths is the result of murder. Homicide ranks twelfth as a cause of death. Yet, despite its presence everywhere, who really understands violence? Why are animals and humans aggressive? Why do parents abuse children? Why does a shy, withdrawn adolescent suddenly kill his family? Why are presidents assassinated? Why do we continuously have war?

We lack this understanding, perhaps, because the science of human behavior is less than a century old. We are at a stage of development where phenomenology prevails; and different points of view, perspectives, emerge—rather than one accepted model or explanation. As T. S. Kuhne, the noted philosopher of science, puts it, behavioral sciences are at a level where various schools of thought exist, just as physics was at this level a few centuries ago. For this reason, a comprehensive volume on many perspectives seems needed at this time. This book is intended to meet that need and to serve as a handbook for those who work with violent offenders and their victims and for those who are trying to understand the high level of violence in our society.

We have brought together multidisciplinary contributions dealing with representative theoretical viewpoints; practical programs aimed at understanding specific forms of murder and aggression; and approaches to the disposition, treatment, and prevention of violence. Every effort has been made to cover all major basic concepts and theories that have been advanced relating to violence and aggression from a psychodynamic, behavioral, sociological, ethological, and biological standpoint. Whenever possible, controversial issues within each perspective are dealt with from all acceptable points of view.

In Part One, theories of aggression are presented that encompass all prevailing schools of thought. Murder is dealt with separately, in Part Two, and different types of murder are examined in the light of the most recent research findings. Part Three focuses on the subject of aggression, from sociological, psychological, biological, and experiential vantage points. The

final section deals with the disposition, treatment, and prevention of violence.

There is no final statement or conclusions by the editors, for this would in some sense be at variance with the volume's purpose: to put together, under one cover, a comprehensive collection of perspectives on violence, murder, and aggression. The authors' contributions, prepared for this book by invitation, do not represent a consensus of opinion. We are not yet ready for final conclusions. We still need to propose theories to compete with each other in order to unravel the truth. We stress continued controversy in this field, rather than premature eclecticism. Perhaps one of the perspectives in this volume ultimately will lead to the definitive viewpoint. Readers are left with the opportunity to form their own opinions and to follow up on the line of research they feel would be most profitable to pursue.

Human beings now have the capacity to destroy all life on earth. If we fail in the mission to understand and control violence, a nuclear holocaust may be the final chapter in our history.

*Maplewood, New Jersey*  
*August 1978*

Irwin L. Kutash  
Samuel B. Kutash  
Louis B. Schlesinger

# Contents



|                                                                            |        |
|----------------------------------------------------------------------------|--------|
| Foreword<br><i>Alexander Wolf</i>                                          | ix     |
| Preface                                                                    | xiii   |
| The Authors                                                                | xxi    |
| <br>Part I. Theoretical Viewpoints                                         | <br>2  |
| 1. Psychoanalytic Theories of Aggression<br><i>Samuel B. Kutash</i>        | <br>7  |
| 2. Learning and Behavioral Theories of Aggression<br><i>Albert Bandura</i> | <br>29 |

|     |                                                                                                   |     |
|-----|---------------------------------------------------------------------------------------------------|-----|
| 3.  | Sociological Theories of Aggression<br><i>Eli Osman, Ching-tse Lee</i>                            | 58  |
| 4.  | Ethological Theories of Aggression<br><i>Richard H. Schuster</i>                                  | 74  |
| 5.  | Sociobiological Theories of Abnormal Aggression<br><i>Vernon H. Mark</i>                          | 101 |
|     | <b>Part II: Murder</b>                                                                            | 134 |
| 6.  | Murder: Evaluation, Classification, and Prediction<br><i>Eugene Revitch, Louis B. Schlesinger</i> | 138 |
| 7.  | The Catathymic Crisis<br><i>Frederic Wertham</i>                                                  | 165 |
| 8.  | Murder in the Family<br><i>Jane W. Duncan, Glen M. Duncan</i>                                     | 171 |
| 9.  | Women Who Kill<br><i>Alan Blum, Gary Fisher</i>                                                   | 187 |
| 10. | Assassins<br><i>Irving D. Harris</i>                                                              | 198 |
| 11. | Legal Homicide and Its Consequences<br><i>Dane Archer, Rosemary Gartner</i>                       | 219 |
|     | <b>Part III: Aggression</b>                                                                       | 234 |
| 12. | Violence in the Family<br><i>Marvin Wolfgang</i>                                                  | 238 |
| 13. | Violence in the Schools<br><i>Robert L. David, Jürg K. Siegenthaler</i>                           | 254 |
| 14. | The Aggressive Female<br><i>Emilie Sobel</i>                                                      | 267 |
| 15. | The Child Abuser<br><i>Brandt F. Steele</i>                                                       | 285 |

|                                                                                              |            |
|----------------------------------------------------------------------------------------------|------------|
| <b>Contents</b>                                                                              | <b>xix</b> |
| 16. The Aggressive Sexual Offender<br><i>Fritz A. Henn</i>                                   | 301        |
| 17. Substance-Induced Aggression<br><i>Robert J. Powers, Irwin L. Kutash</i>                 | 317        |
| 18. Aggression in the Laboratory<br><i>John Sabini</i>                                       | 343        |
| <b>Part IV: Disposition, Treatment, and Prevention</b>                                       | <b>372</b> |
| 19. Violence: Treatment Versus Correction<br><i>Seymour L. Halleck</i>                       | 377        |
| 20. The Adversary System<br><i>Michael Perlin, Robert L. Sadoff</i>                          | 394        |
| 21. Treating the Violent Offender<br><i>Denis J. Madden, John Lion</i>                       | 404        |
| 22. Treating the Sexual Offender<br><i>William R. Reevy</i>                                  | 413        |
| 23. Treating the Violent Law Enforcement Officer<br><i>Harvey Schlossberg</i>                | 438        |
| 24. Treating the Victim of Aggression<br><i>Irwin L. Kutash</i>                              | 446        |
| 25. Society's Recognition and Control of Violence<br><i>Sandra Haber, Bernard Seidenberg</i> | 462        |
| 26. Prevention of Violence<br><i>Benjamin B. Wolman</i>                                      | 480        |
| References                                                                                   | 495        |
| Index                                                                                        | 559        |

# The Authors



Irwin L. Kutash, Ph.D., Clinical assistant professor of psychiatry and mental health sciences, New Jersey College of Medicine and Dentistry; chief, Alcohol Rehabilitation Program, Coordinator of Psychology Training, and Chairman, Behavioral Sciences Council, Veterans Administration Hospital, East Orange, New Jersey; psychological consultant, Cedar Grove Residential Treatment Center, Department of Human Resources, Cedar Grove, New Jersey; and faculty member, New Jersey Division, New York Center for Psychoanalytic Training, New York City.

Samuel B. Kutash, Ph.D., Professor of psychology, Graduate School of Applied and Professional Psychology, Rutgers University, and Kean College of New Jersey; psychological consultant, Veterans Administration Hospital, East Orange, New Jersey; and director, New Jersey Division,

New York Center for Psychoanalytic Training, New York City.

Louis B. Schlesinger, Ph.D., coordinator, Violence Clinic, Veterans Administration Hospital, East Orange, New Jersey; clinical assistant professor of Psychiatry and Mental Health Sciences, New Jersey College of Medicine and Dentistry; and psychological consultant, Fair Oaks Hospital, Summit, New Jersey.

Dane Archer, Ph.D., Associate professor of sociology, University of California, Santa Cruz

Albert Bandura, Ph.D., Professor of psychology, Stanford University

Alan Blum, Ph.D., Department of Child Psychiatry, University of California, Los Angeles, Medical Center

Robert L. David, Ph.D., Department of Sociology, American University

Glen M. Duncan, M.D., Psychiatrist, Rochester State Hospital, Minneapolis

Jane W. Duncan, M.D., Psychiatrist, Department of Child Psychiatry, Mayo Clinic

Gary Fisher, Ph.D., Psychologist in private practice, Hollywood, California

Rosemary Gartner, Department of Sociology, University of Wisconsin

Sandra Haber, Ph.D., Director of Psychological Services at Howard Shapiro, Doctor of Osteopathy, Professional Corporation, New York City

Seymour L. Halleck, M.D., Professor of psychiatry, University of North Carolina Medical School

Irving D. Harris, M.D., Senior consultant, Illinois State Psychiatric Institute

Fritz A. Henn, M.D., Ph.D., Assistant professor, Department of Psychiatry, State Psychopathic Hospital, University of Iowa

Ching-tse Lee, Ph.D., Department of Psychology, Brooklyn College, City University of New York

John Lion, M.D., Professor of psychiatry and director, Clinical Research Program for Violent Behaviors, University of Maryland School of Medicine

Denis J. Madden, Ph.D., Assistant professor and associate director, Clinical Research Program for Violent Behavior, University of Maryland School of Medicine

Vernon H. Mark, M.D., Professor of neurosurgery, Harvard University Medical School

Eli Osman, Ph.D., Department of Psychology, Brooklyn College, City University of New York

Michael Perlin, Director, Department of Public Advocate, New Jersey

Robert J. Powers, Ph.D., Clinical psychologist, Veterans Administration Hospital, East Orange, New Jersey

William R. Reevy, Ph.D., Staff psychologist, General Population Units, Federal Correctional Institution, Butner, North Carolina

Eugene Revitch, M.D., Clinical associate professor of psychiatry, College of Medicine and Dentistry of New Jersey, Rutgers Medical School

John Sabini, Ph.D., Assistant professor of psychology, University of Pennsylvania

Robert L. Sadoff, M.D., Associate professor of psychiatry, University of Pennsylvania Medical School

Harvey Schlossberg, Ph.D., Director, Psychological Services, New York City Police Department



Richard H. Schuster, Ph.D., Assistant professor of psychology,  
University of Haifa, Israel

Bernard Seidenberg, Ph.D., Professor of psychology, Brooklyn  
College, City University of New York

Jürg K. Siegenthaler, Ph.D., Department of Sociology, American  
University

Emilie Sobel, Psy.D., Clinical psychologist, Brooklyn Community  
Counseling Center

Brandt F. Steele, M.D., Professor of psychiatry, University of  
Colorado Medical Center, psychiatrist, National Center  
for Prevention and Treatment of Child Abuse and Neglect,  
and training analyst, Denver Institute for Psychoanalysis

Frederic Wertham, M.D., Psychiatrist in private practice, New  
York City

Marvin Wolfgang, Ph.D., Professor of sociology and law and Di-  
rector for Studies in Criminology and Criminal Law, Uni-  
versity of Pennsylvania

Benjamin B. Wolman, Ph.D., Professor of psychology, Long Is-  
land University

# VIOLENCE



*Perspectives  
on Murder  
and Aggression*

*The authors dedicate this book to  
Gustave M. Gilbert  
who died while preparing a chapter on political violence. Dr. Gilbert was a pioneer in the study of violence and well known for his first-hand psychological examinations of the Nuremberg defendants and for his book, Nuremberg Diary.*

*I. L. K.  
S. B. K.  
L. B. S.*

# *Part I*



The enigma of human aggression and violence has challenged and intrigued behavioral scientists, philosophers, religious leaders, the legal profession, and all those who have attempted to understand and explain the phenomenon. In this section the editors have assembled five essential and significant points of view concerning aggression. Samuel B. Kutash, in the chapter on psychodynamic theories, starts with the classical Freudian perspective on aggression, tracing the changes in Freud's thinking about this complex problem. He then discusses some of the major representative non-Freudian and modified psychoanalytic theories, such as those of Adler, Jung, Fromm, and the ego psychologists (Bellak, Hartmann, Kris, Lowenstein, Mahler, and others). Finally, he presents an integrated psychodynamic theory of aggression, in which he distinguishes between benign

# *Theoretical Viewpoints*



(adaptive) aggression and malignant (destructive) aggression. Of particular interest is his explanation of “aggression in the service of the ego” as the prototype for benign aggression or self-assertion—a constructive manifestation of adaptive behavior.

In Chapter Two the distinguished behavioral scientist Albert Bandura presents an all-encompassing social learning theory of aggression, which is intended to include all forms of aggression, whether individual or collective. His definition of aggression is a straightforward one: behavior that results in personal injury and in destruction of property. In sharp contrast with those theorists who believe that aggression is an inner drive or, as the ethologists postulate, an instinct, Bandura makes a strong case for the position that aggressive behavior is acquired. He discusses three different modeling influences: familial influ-

ences, subcultural influences, and symbolic modeling. Of special interest is his discussion of the various styles of collective aggression related to symbolic modeling. He puts less emphasis on the learning of aggressive behavior by direct experience. A major contribution is his discussion of instigators of aggression—how aggressive patterns are activated and channeled. Bandura cites research confirming the conclusions of Miller that frustrations do *not* have uniform behavioral effects. He places more reliance on the arousal-prepotent response formulation than on the frustration-aggression hypothesis. Finally, Bandura gives a detailed analysis of the conditions that sustain aggressive actions and responses. The chapter provides a clear exposition and summary of the essential aspects of social learning of aggressive and violent behavior.

In Chapter Three Eli Osman and Ching-tse Lee present their views on the possibilities of developing sociological theories of aggression or molding formally structured theories so that they would be applicable to their description of aggression. They raise questions rather than give definitive answers. In contrast to Bandura, they assume that individual man is potentially aggressive. They define aggression as a form of behavior that violates the personal rights of others—particularly by physical violence or the threat of such violence. They consider the question of legitimacy to be a prime determinant of whether behavior is regarded as aggression or violence. The authors do not shrink from speculating, since they feel that no concept in the literature has any proven predictive power. Their most important contribution is their delineation of the roles of conflict, aggression, and violence in social systems, and particularly their explanation of how violence occurs and when and where it is manifested. They also attempt to make a case for fitting their sociological thesis into useful formal mathematical theory—quite an achievement if it can be accomplished.

In Chapter Four Richard Schuster presents the ethology of aggression, starting with and emphasizing the momentous work of Konrad Lorenz and noting also the contributions of Desmond Morris and Robert Ardrey. Their theories stress the biological inheritance and inevitability of human aggression. Schuster examines, and sometimes questions, the validity of these theories. Is aggressive behavior the product of instinct or learning? Ethologists hold a definitely biological approach that links animal and human aggression, whereas critics such as those within the field of anthropology emphasize culture as the main

determinant. According to the ethological view, aggression is a direct form of competition; that is, individuals confront each other in threatening or fighting behavior whereby each tries to prevail over the other. The winner gains preferential access to resources or mates, in which case aggression is adaptive. Aggression thus evolves as an instinct ensuring survival of the fittest. Whether aggression is similarly adaptive in humans is an open question.

Of special interest is Schuster's discussion of ritualized aggression in the antelope, sheep, and goats. These, as well as "ritualized threats," are examples of fixed action patterns of "species-specific aggression." Included are "displacement responses," "intention movements," "redirected movements," "physiological concomitants," and "appeasement movements." Schuster elaborates the concept of "action-specific energy," using the well-known hydraulic model of energy accumulation, and notes that—according to this concept—"the primary cause of an aggressive act is the buildup of aggressive motivation." Thus, according to Lorenz, "Even when aggression has ceased to be adaptive, there is no way that its occurrence can be forestalled." Lorenz cites the prevalence of human violence and murder as evidence for a unique case of nonadaptiveness. Schuster presents criticisms of the etiological theories of animal aggression and describes his own field studies of social organization and aggression in the African antelope. Although admittedly Lorenz has forged an ingenious theory of human aggression, Schuster's studies and his review of the literature suggest that the concept of action-specific energy is not an acceptable explanation of aggression.

In the final chapter of this section, Vernon Mark takes the position that violent behavior—like all behavior—is always the product of brain-environment interaction. He deplores the position of those professionals who attribute such behavior either to "brain problems" or to "faulty environment." He believes that all violent individuals require a thorough examination of brain function. He takes a strong stand against "dualism," as manifested in "explanations of the causes of behavior which do not take the brain into account." His discussion of brain function is highly informative, but of even greater interest is his presentation of the evidence for the connection between neurological disease and abnormal aggressivity. The concept of the "emotional brain" is put forth and outlined in terms of the "limbic" system. He cites experimental animal studies showing

that rage, for example, is evoked only from a small part of the amygdala. "Limbic brain tumors have been shown to be associated with abnormally aggressive behavior." A variety of brain disorders—such as epilepsy, brain lesions and injuries, and alcoholic and other "poisoning" of brain tissue—are discussed. He attributes inappropriate or abnormal aggressive behavior to "decompensation in an individual with a diseased or malfunctioning limbic system" and to the fact that such a person, "more readily than an individual with a normal brain," displays violence when subjected to environmental stress. Mark acknowledges that social disintegration, frustrations and aggression, and the subcultural norms of violence all play a part in generating violent behavior; at the same time, he takes on and attempts to answer all the critics of the sociobiological theory of aggression, which he accepts.



# Psychoanalytic Theories of Aggression

*Samuel B. Kutash*



The subject of man's aggressive behavior and potentiality for violence has become perhaps the highest priority for the attention of the behavioral sciences. There are now a variety of theories of aggression from the points of view of biology, ethology, sociology, social learning, and the various branches of psychology, such as physiological psychology, social psychology, and clinical psychology. Similarly, the subject has been studied and theories developed from the medical standpoint, including the genetic, neurological, and psychiatric points of view. The sciences of anthropology, biochemistry, endocrinology, and physiology have also made their contributions. This chapter reviews the relevant psychodynamic theories of aggression, as expressed—either directly or indirectly—in classical psychoanalysis, ego psychology, the modified psychoanalytic approaches, and the

nonanalytic psychodynamic and psychogenic approaches.\* It concludes with a comprehensive integrated psychodynamic theory of aggression and violence.

### Classical Psychoanalysis and Aggression

Our discussion of aggression from a psychodynamic point of view begins with the work of Sigmund Freud. Although Freud frequently revised his formulations about aggression in man throughout the course of the development of his thinking and as he accumulated more clinical data, he ultimately concluded that man possesses an aggressive drive from within. He coupled this drive with the sexual drive (libido) as the two basic components of his dual instinct theory. Freud also formulated a theory of the life and death instincts (Eros and Thanatos) and regarded aggression against the outside world as an "externalization" of the death instinct. Some of Freud's critics have reacted negatively to this conceptualization. Singer (1971, p. 1), for instance, writes that Freud "found little constructive to offer for studying what he now regarded as a fundamental human drive." Such critics, however, do not often take into account an important part of Freud's theory; namely, his view that the ego and the superego can act to control, modify, and defend against the unacceptable drives from within and that the ego can serve to harmonize the aggressive drive with outer reality.

According to Brenner (1973, p. 21), Freud's theory assumes "that in all of the instinctual manifestations which we can observe, whether normal or pathological, both the sexual and the aggressive drives participate. To use Freud's terminology, the two drives are regularly 'fused,' though not necessarily in equal amounts." Moreover, the aggressive drive can be traced through the transitions from oral to anal to phallic that Freud described for the manifestations of the sexual drive. Thus, Brenner (1973, p. 31) states, "Aggressive impulses in the very young infant are apt to be discharged by oral activity such as biting. Somewhat later, soiling [and] retention of feces become important outlets for the aggressive drive, while to the slightly older child the penis and its activity are used, or at least conceived of

\*Not all of the modified psychoanalytic theories discussed here directly elaborate an explanation that applies specifically to aggression and violence. However, I have used the basic theories to develop explanations of aggression and violence that are natural outgrowths of the theories.

(used in fantasy), as a weapon and a means of destruction respectively." That is, although "the child of five or six . . . does not actually use his penis as a weapon . . . the weapons he uses in his games and fantasies, such as spears, arrows, guns, and so on, can be shown by analysis to represent his penis in his unconscious thought" (Brenner, 1973, p. 31).

Even before Freud arrived at his conclusion that aggression is a basic drive lodged in man's unconscious, he put forth a number of ideas that became incorporated in theories of aggression. At first Freud postulated that oral frustration in the infant brings forth rage reactions. This idea, that frustration leads to aggression, became the basis for the frustration-aggression hypothesis later elaborated by Dollard and his colleagues (1939). Their basic hypothesis was that "the occurrence of aggressive behavior always presupposes the existence of frustration and, contrariwise, the existence of frustration always leads to some form of aggression" (quoted in Fromm, 1973, p. 66). Later, Miller (1941) contradicted the assertion that frustration can lead to a number of different kinds of responses, one of which might be aggression. As a global explanation of violence and aggression, the frustration-aggression theory does not hold up, although it may apply as one determinant of some instances of aggression.

Freud's theory of the libido also has components relevant to aggression. Specifically, Freud described cathexis as the investment of libidinal or psychic energy in a bodily part, a function, an idea, an object, or a person. Thus, in the oral stage there is cathexis of the oral region; when the teeth grow in, the "oral erotic stage" is followed by the "oral sadistic stage." A "fixation" at this stage—either through frustration or through parental mishandling or rejection—may, according to Freudian theory, lead to a strong sadistic component in the character structure; and this component may be manifested later as "verbal biting criticism." Similarly, in the "anal sadistic stage" characteristics such as hostility and outbursts of anger may become channels for aggression. Thus, individual manifestations of aggression, such as sadistic sexual practices (genital stage) and other forms of sadistic behavior, would be explained by the vicissitudes of the libido.

The Freudian assumption of the oedipus complex also can serve as a possible explanation for certain types of aggression and violence, particularly when the so-called oedipal phase is not resolved adequately by identification with the parent of

the same sex. Investigating the unconscious mental lives of neurotic patients, Freud uncovered fantasies of incest with the parent of the opposite sex, coupled with intense envy and murderous rage against the same-sex parent. He drew an analogy between these fantasies and the Greek legend of Oedipus, who unknowingly killed his father and married his mother. Later psychoanalytic studies confirm that this constellation, which Freud (1900) called the oedipus complex, also is present in normal persons and is experienced by all people from the age of 3 to 6 years; and anthropological studies of different cultures confirm the existence of incestuous conflicts and parenticidal impulses in every culture studied (Roheim, 1970). In discussing the universality of the oedipus complex, Brenner (1973, pp. 115-116) includes "inverse or negative oedipal wishes; that is, fantasies of incest with the parent of the same sex and murderous wishes toward the parent of the opposite sex." He asserts that this is also a general phenomenon. He goes on to stress that "The most important single fact to bear in mind about the oedipus complex is the strength and force of the feelings which are involved. It is a real love affair. For many people it is the most intense affair of their entire lives, but it is in any case as intense as any which the individual will ever experience." An unresolved oedipus complex, coupled with the failure to develop sufficient ego strength and an adequate superego, has been offered as an explanation for various crimes of passion—particularly patricide and matricide and in instances where the victims are parent surrogates. The recent "Son of Sam" case may well be considered an example of such a series of crimes. The fear of retaliation, which is part of the oedipal constellation, often results in the killer's unconsciously leaving clues by which he may be caught and punished; or he may actually send notes to the police, pleading to be stopped or apprehended.

As mentioned, Freud's ultimate theory of aggression evolved gradually and was subjected to various revisions. Until 1905 he regarded sadism as an aggressive component of the sexual instinct, which becomes exaggerated and independent and, through displacement, assumes the leading position (Freud, 1905b). At the same time, he recognized that the impulses of cruelty arise from sources that are independent of sexuality but may become united with it at an early stage (1905b). This is the early inkling of his later idea that the two drives are independent but are regularly "fused." Four years later, Freud was still ambivalent about whether aggression represents an independent

drive; he stated that he could not bring himself to assume the existence of a special aggressive instinct alongside of the familiar instincts of self-preservation and sex and on an equal footing with them (1909). By 1915 he was pursuing both lines of thought; he sometimes regarded aggressiveness as a component of the sexual instinct and sometimes as an independent drive separate from sexuality (1915a).

By 1920 and even more so in 1923, Freud revised his entire theory of instincts and resolved his ambivalence by a new hypothesis—that of the life and death instincts, Eros and Thanatos. He now hypothesized that the muscular system, serving as a “special organ,” can divert the destructive impulses stemming from the death instinct onto the external world, thus successfully neutralizing the death instinct. Through the muscular system, then, the death instinct expresses itself, though probably only in part, as an instinct of destruction directed against the external world and other organisms (1923). He later referred to this instinct as the instinct for mastery or the will to power (1924). Freud’s assumption of the death instinct—which, he felt at the time, is inherent in all living things and can be handled only by turning the destructiveness against the outside world through aggression—led him to a painful conclusion: War and destructive aggression are inevitable; the alternative is illness, self-destruction, masochism, or passive and ineffectual behavior leading to self-defeat.

Freud’s contribution consisted of defining aggression as a basic drive. “By far the most widely accepted notion of aggression among practical workers in the field of mental health, especially, and in political science and social organization, as well, has been the view that aggression is a fundamental human drive” (Singer, 1971, p. 3). Freud was not the first to designate man’s aggression as an instinct. McDougall (1908) did so but stressed the desirability of man’s socializing his instinct for “pugnacity.”

Freud struggled very hard to reconcile the conflict between his scientific objectivity and his therapeutic humanism, and he began to search for ways of controlling aggression and directing it into adaptive channels. It remained for later psychoanalytic thinkers, as we shall see in this chapter, especially Hartmann, Kris, and Lowenstein ([1949] 1964), to refine and complete this part of the theory and to distinguish clearly between adaptive aggression and destructive or dangerous aggression and violence. Freud also at one point emphasized the ego instinct or

the instinct of self-preservation, which was later taken up and developed as the source of adaptive aggression or self-assertion.

### Non-Freudian Psychodynamic Theories of Aggression

Some of Freud's earliest disciples eventually departed from classical psychoanalysis and founded their own psychodynamic systems. (For a complete classification of modifications and derivatives of psychoanalysis, see Kutash, 1976.) One of these early disciples was Alfred Adler (1927), who developed a theoretical system which he called *individual psychology*. Of prime importance in Adlerian theory is the child's feeling of helplessness and his development of an inferiority complex, for which he strives to compensate by a drive toward superiority or power. Adler stressed attention-getting and power drives as strong motivating forces, particularly in neurotics and even more so in some varieties of severe pathology. To recognize the drive for power as a source of aggression, one need only recall the numerous examples of crimes committed under the influence of an inordinate need for attention and for power over others. The personalities and life histories of assassins such as Lee Harvey Oswald and Sirhan Sirhan illustrate very clearly their feelings of inferiority, their need for the limelight, their envy of more fortunate and better-endowed persons, such as the Kennedy brothers. The numerous power-motivated murders in the families of the last emperors of ancient Rome and in the royal families of Tudor England are further examples of aggression and violence motivated and fueled by the drive for power. The Hitler holocaust is perhaps the most flagrant example of what can be perpetrated by a power-hungry, power-driven maniac compensating for early feelings of inadequacy and inferiority from which he suffered when he was a disgruntled house painter.

A theory of destructive aggression based on an inordinate drive for power has long been put forth as an explanation for war and for rivalries in politics and in all kinds of organizations. Certainly the behavior leading to the resignation of Richard Nixon and the problems of the chief Watergate defendants, such as John Erlichman, John Mitchell, and H. R. Haldeman, had a great deal to do with power drives, sibling rivalries, attention-getting needs, and compensation for feelings of inferiority. Adler postulated sibling rivalry as one of the basic behavioral motivations. Starting with Cain's murder of his brother Abel,

the story of Jacob and Esau, and the observations of competition between brothers and contemporaries in all walks of life, one could support strongly the importance of sibling rivalry and its derivatives as an explanation for aggression. Adler himself was involved in an eventual rivalry with Freud, and the power motivation may have been a factor leading to the split between the two men. Another Adlerian hypothesis related to aggression is his theory of masculine protest. A comprehensive Adlerian theory of aggression would include as components the inferiority complex, the drive for power, sibling rivalry, ordinal position in the family, attention-getting mechanisms, and masculine protest in various combinations to explain each occurrence. It is interesting that Freud, in *The History of the Psychoanalytic Movement* (1914), stated, "The view of life which is reflected in the Adlerian system is founded exclusively on the aggressive instinct; there is no room in it for love."

Carl Jung (1933) is another early disciple who broke with Freud and then went on to develop his own system, which included such concepts as psychological types, extroversion-introversion, archetypes, racial and collective unconscious, superior and inferior functions, and a mystical preoccupation with transcendentalism and even life after death. A theory of aggression constructed on the basis of Jungian hypotheses would regard violence and destructive aggression as an unleashing of primordial archetypal behavior inherent in the collective unconscious. An extrovert will "act out" his aggression against others or against the environment, whereas the violently aggressive introvert will be self-destructive and perhaps suicidal. Somewhat similarly, a person in whom thinking is the superior function and feeling the inferior function will exert intellectual control over aggression; in contrast, the person in whom the feeling function is superior is more likely to express aggression overtly. Finally, some archaic experiences which seem to occur in a number of cultures—experiences such as "the passion to spill blood" or "blood lust"—may fit in with Jung's conception of the racial unconscious and archetypes.

Otto Rank (1945) departed from the Freudian fold mainly by putting forth his theory that the trauma of birth is the original source of anxiety and the basic cause of neurosis. In Rank's view, therapy consists mainly in mobilizing the will of the patient so that he can be psychologically "reborn." The drive toward separation and differentiation from the mother through assertion of an independent will would serve as a Rank-

ian explanation of aggression. A benign form of aggression or self-assertion results when the assertion of independent will is proportionate to the needs of the individual and is not destructive to the other person. Destructive and violent aggression results when the assertion of will is exaggerated and disproportionate to the needs of the individual. This disproportion stems from an early struggle of wills between the child and the mother figure; this early struggle, if not fully resolved, becomes a life-long struggle that sometimes results in the destruction of the opponent.

### Modified Analytic Theories of Aggression

Of some interest in relation to the theme of aggression is the holistic approach of Karen Horney (1937). Her modifications of classical psychoanalysis included, among other theoretical differences, a strong emphasis on the cultural influence, a here-and-now focus, and a rejection of Freud's theory of penis envy. Freud's penis envy theory and his famous statement that "anatomy is destiny" implied that males are more dominant and females more submissive. Horney believed that this phenomenon might be, at least in part, culturally conditioned rather than the result of biological or glandular sexual differences. However, of major importance for the explanation of aggression is Horney's theory of character structure. She divided people into those who "move away from people," those who "move toward people," and those who "move against people." Aggression of a destructive nature would thus occur in individuals who move against people, whereas more benign self-assertion would be characteristic of persons who move toward people. Those who move away from people would react to threat by a "flight" reaction rather than a "fight" reaction. Horney also put forth a hypothesis of "competition" as a substitute for Freud's libido theory, which she rejected.

The theoretical framework of Harry Stack Sullivan (1953) places primary emphasis on the relationship between the person and other people in his environment as the determinant of personality development: "[Sullivan] holds that, given a biological substrate, the human is the product of the interaction with other human beings, that it is out of the personal and social forces acting upon one from the day of birth that the personality emerges" (Thompson, 1950, p. 211). From this point of view, aggression (whether adaptive or destructive) and vio-



lence would result from disturbances (parataxic distortions) in an individual's interpersonal interactions and relationships. However, this theory does not clarify whether any biological predisposition or drives bring about disturbed interpersonal relationships, which in turn create interpersonal or displaced aggression. There is a chicken-egg problem involved: Do disturbed interpersonal relations cause destructive aggression, or does aggressiveness cause disturbance in relationships?

Related to the school of interpersonal relations is the British derivative of psychoanalysis, the object relations theory of personality and character development. Contributions to this theory have been made by Melanie Klein, W. R. D. Fairbairn, and Donald Winnicott (Guntrip, 1973)—all of whom emphasize the individual's early relationships with his mother or with a mothering person. From this point of view, aggression would be explained mainly on the basis of inordinate rage reactions developed in a frustrating relationship with a rejecting or inadequate mothering person. (The ego psychologists discussed in a later section of this chapter also put a great deal of emphasis on the mother-child relationship.)

By far the most comprehensive theory of aggression to come from the cultural school of psychoanalysis is the seminal work of Erich Fromm (1973). He distinguishes between benign aggression and malignant aggression. Benign aggression is defensive and "built in in the animal and human brain" and enables the individual to act "against threats to vital interests." Man's "hyperaggression" or destructive aggression is "not due to a greater aggressive *potential* but to the fact that aggression-producing *conditions* are much more frequent for humans than for animals living in their natural habitat" (p. 185). Thus, "man's destructiveness and cruelty cannot be explained in terms of animal heredity or in terms of a destructive instinct, but must be understood on the basis of those factors by which man *differs* from his animal ancestors. The problem is to examine *in what manner and to what degree the specific conditions of human existence are responsible for the quality and intensity of man's lust for killing and torturing*" (Fromm, 1973, p. 186). Fromm thus takes a position in direct contradiction to Freud's theory of a "death instinct" to explain destructive activity in man.

Fromm goes on to detail a number of varieties of what he refers to as *pseudoaggression*—"aggressive acts that may cause harm, but are not intended to do so" (p. 188). Among these are

"accidental aggression," "playful aggression," and "self-assertive aggression." He also discusses *conformist aggression*, "acts of aggression that are performed not because the aggressor is driven by the desire to destroy, but [because] he is told to do so and considers it his duty to obey orders" (p. 207), and *instrumental aggression*, which has the aim of obtaining that which is necessary or desirable. He regards war as the most important example of instrumental aggression. In his view, war is caused not by innate human destructiveness but "by instrumental aggression of the military and political elites" (p. 215).

Fromm believes that cruelty and destructiveness are manifestations of malignant aggression peculiar to man. He postulates two forms of destructiveness: spontaneous destructiveness and destructiveness that is bound in the character structure. Examples of spontaneous destructiveness are vengeful destructiveness and ecstatic destructiveness. Vengeful destructiveness is a spontaneous reaction to intense and unjustified suffering inflicted upon a person or the members of the group with which he is identified. It differs from normal defensive aggression in two ways: (1) it occurs *after* the damage has been done and hence is not a defense against a threatening danger; (2) it is of much greater intensity and is often cruel, lustful, and insatiable (pp. 71-72). Ecstatic destructiveness occurs in ritualistic, primitive orgies or states of trance organized around rage and destructiveness.

Examples of cruelty and destructiveness woven into the character structure are sadism and necrophilia. In discussing the sadistic character, Fromm uses Joseph Stalin as a clinical case study of nonsexual sadism and Heinrich Himmler as a clinical case of anal-hoarding sadism. He also gives a detailed clinical discussion of necrophilia, with Adolf Hitler as a prime example. His analysis of Hitler's character as a necrophiliac is well documented by the man's life history. Fromm applies the term *necrophilia*, or "love of the dead," to a character-rooted passion which he labels the *necrophilous character*. In his view, however, the malignant forms of aggression—sadism and necrophilia—are *not* innate; "they can be substantially reduced when the socioeconomic conditions are replaced by conditions that are favorable to the full development of man's genuine needs and capacities; to the development of human self-activity and man's creative power as its own end" (p. 436). "All factors that make man into a psychic cripple turn him also into a sadist or a destroyer" (p. 436). To the obvious possibility that this posi-

tion will be considered "overoptimistic" or "unrealistic," Fromm replies that he has "rational faith" and hope that such changes in the human condition can be achieved. The antidote he offers is "the love of life" (p. 436).

### Ego Psychology and Aggression

Freud formulated his theory of aggression from the point of view of id psychology and made only a small beginning toward integrating it with ego and superego psychology. Like most analysts (for instance, Fenichel, 1945), Hartmann and his collaborators, Kris and Lowenstein ([1949] 1964), reject Freud's theory of a "death instinct" as the source of aggression and amplify the theory of aggression by depicting the role of the ego and the superego in controlling, displacing, and/or channeling the aggressive drive. They believe that aggression is an instinctual drive rather than an instinct in the biological sense. Mainly, they explain the difference in terms of the idea that the development of the ego is in part a learning process. Learning thus guarantees the gratification of the inner urges stemming from the instinctual drives. In contrast, the biological instincts can lead to gratification with virtually no learning or a minimum of learning: "Instinct in the ideal case guarantees the survival of the individual at least in lower animals, while in man the guarantee of survival rests with the ego" (Hartmann, Kris, and Lowenstein, [1949] 1964, p. 61).

Of some interest is the fact that many psychoanalytic theorists and practitioners are more inclined to accept the idea of a diversity of drives subsumed under libido theory. That idea is incorporated, for instance, in Murray's (1938) need-pressure system, which provided the rationale for such projective techniques as the Thematic Apperception Test (Murray, 1943). Bellak regards the psychoanalytic dual theory of drives, sexual and aggressive, as "another instance of unnecessary semantic confusion because each drive can be fragmented into many partial drives" (see Spence, 1967, p. 29). For example, libido theory, in Bellak's view, contains such drives as the wish to see, the wish to exhibit, and the like.

Hartmann, Kris, and Lowenstein describe aggression in terms of impetus, source, aim, and object, just as Freud did for libido. With reference to *impetus*, they draw a strict parallel with libido, since it deals with the pressure of the drive. They then go on to indicate that activities of all kinds offer oppor-

tunities for the discharge of aggression. The absence of activity is in some instances an expression of suppressed aggression. Thus, "*active aggression* refers to the wish to harm, to master, or to destroy an object; *passivity* refers to the wish to be mastered, harmed, or destroyed" ([1949] 1964, p. 65)—a form of aggression turned inward. It is worth noting that the psychiatric nomenclature includes a diagnosis of *passive-aggressive* conflict (American Psychiatric Association, 1968).

Bellak and other ego psychologists do not agree that aggression is an independent drive. Bellak remarks, "It would seem that we are not dealing with a specific drive but instead with one aspect of an organismic reaction to environment (ordinarily subsumed under cathexis) which only later becomes more specific by maturation and learning, e.g., specifically aggressive" (in Spence, 1967, p. 29). This view is closer to the position of Fromm and perhaps even to that of the learning theorists like Bandura. The learning theorists and the behaviorists, however, explain aggression as almost entirely a learned or conditioned reaction.

Hartmann, Kris, and Lowenstein ([1949] 1964) enumerate four types of conflict which modify the aims of aggression. One is an instinctual conflict, created when the aggressive and libidinal drives are both vested in the same object. Another is a conflict with reality, which occurs when the object of aggression reacts to the attempts at completion of the aggressive acts in a way that may endanger the aggressor. A structural conflict involving the ego may result from anticipation by the ego of danger to the individual. In this instance the ego is in part already identified with the object, so that the ego may be in opposition to the completion of the aggressive acts. Lastly, there may be a conflict involving the superego, where the moral values are in conflict with the expression of the aggression.

The narcissistic personality, in whom the self is the primary object, has difficulty in acting out his aggression, since the aggressive act may involve danger to the self or ego. The work of Kohut (1971) clarifies this aspect further. Bellak regards the "conflict with reality" as "a coexistence of an aggressive drive and learned inhibition related to self-harm" (in Spence, 1967, p. 30). In commenting on the structural conflict involving the ego, Bellak states, "There is a coexistence of an aggressive drive and learned inhibition, the latter being predicated upon apperceptions of the self, superimposed on and integrated with apperceptions of the object" (p. 30). Bellak also refers to the struc-

tural conflict involving the superego as "a coexistence of aggressive drive and learned apperceptions concerning culturally acceptable modes of behavior" (p. 30).

The impact of aggression may be modified by four types of processes, according to Hartmann, Kris, and Lowenstein ([1949] 1964, p. 68-69): "(1) by *displacement* of aggression to other objects; (2) by *restriction* of the aims of the aggressive impulses; (3) by *sublimation* of aggressive energy; and (4) through the influences of libido mentioned above, one of these influences operating as *fusion*. These processes are frequently interdependent." Hartmann, Kris, and Lowenstein regard displacement as the simplest of the four processes. The displacement of anger from the original target to a less threatening substitute target, or one that is nonlibidinized or inanimate, occurs frequently in human experience. Freud (1930) and later Bibring (1941) pointed out that social conflict is often exploited by political demagogues who manipulate the masses and thus provide each individual member of the society or group with an enemy who is accepted enthusiastically as a target of aggression. Social tension is thus used for the displacement of individual tension.

Through sublimation, aggressive energy is "deinstinctualized"—just as, in Freudian terms, the libido is "desexualized." The sublimated libido, according to Freud, contributes to the formation and maintenance of permanent object relations and to the "molding of psychic structures"; once the psychic structures are formed, the energy is at the disposal of the ego and the superego. Similarly, aggressive energy is "neutralized" (Hartmann, 1952) and thus can be transferred from the id to the ego. According to Hartmann, Kris, and Lowenstein ([1949] 1964, p. 74), "the capacity to neutralize large quantities of aggression may constitute one of the criteria of ego strength."

In elaborating the functions of neutralization, Hartmann and associates ([1949] 1964, p. 71) indicate that not all internalized aggression leads to self-destruction, "just as not all internalized libidinal energy necessarily leads to self-infatuation." On the contrary, neutralized psychic energy supplies the ego and the superego with motor power and equips the ego for its function in action. The internalization of aggression is an essential condition for the formation of the superego. Once the superego is formed, modified aggression is used by the superego in relation to the ego. "Thus, what appears as displacement, restriction, or sublimation, considered in relation to the id and to

discharge of aggressive energy, is, if we take into account the total personality and its position in social reality, a most important prerequisite of mental integration and of mastery of the environment" (p. 72).

Once the ego is sufficiently cathected and established as a functioning organization, the ego and aggression become more closely linked, since the ego organization normally controls mobility, and the muscular apparatus serves as a medium for the discharge of aggression: "Musculature and motility, apparatuses for the discharge of aggression, contribute decisively to the differentiation between self and environment and, through action, to the differentiation of the environment itself. The environment in turn invites action and determines specific areas of action; it thus offers opportunities for the discharge of particular modes of aggression and their individual modifications" (p. 72).

Whether aggressive energy is utilized in a fight reaction to objective danger or results in a flight reaction depends, among other factors, upon the extent of the perceived danger and the strength of the ego. Aggressive energy not discharged in flight may be internalized. It may be used as cathexis of the superego, generating guilt feelings; or it may be neutralized in the ego without interfering with the individual's integrity. Internalized aggressive energy without neutralization can lead to self-destructive impulses.

### Ego Boundaries and Aggressive Behavior

Some of the crucial questions raised by those who have addressed the problem of aggression and its manifestations from the psychodynamic point of view are the following: (1) Under what conditions is aggression acted out directly (that is, expressed in overt behavior)? (2) When does aggression remain on a fantasy level and get expressed symbolically and indirectly? (3) Are there two kinds of aggression, which can be labeled benign and malignant, or does an undifferentiated aggressive drive or potentiality become either benign or malignant, depending on how it is channeled or controlled? (4) What determines the outcome of an aggressive drive: the strength of the drive; the built-in defenses; the reality situation, including the existence of objective danger; the quality of the ego organization with its conscious controls and planning capacity; or the value system and the qualities of the superego? (5) Does psychopathology

play an overriding role in producing violence, or is violent behavior a learned or conditioned reaction? A great deal of light can be shed on these questions by focusing on the ego and its intactness or deficiencies, as illustrated by the condition of the ego boundaries. The concept of ego boundaries was described by Federn (1952) in relation to the psychoses and developed further by Gutheil (1958), Zucker (1959), Ivey (1959), and Kutash (1963, 1976).

The ego when fully cathected develops two major boundaries, which enable it to carry out its integrative functions. One of these boundaries differentiates the ego from the id; the other differentiates the ego from outer reality. "In the psychologically well-functioning individual, these boundaries are optimally cathected and flexible, so that the ego functions are properly exercised, including suitable repression and selective admittance into consciousness of primordial and instinctual drives from within and adequate reality testing and cognitive, perceptual experiencing of the external world. The major task of the ego is the successful integration of these pleasure drives and needs from within, with the reality considerations and requirements of the external world" (Kutash, 1965, p. 52). When the ego is thus "optimally cathected," both boundaries serve as "semi-permeable membranes"; the urges, promptings, and impulses from within (including the impulses toward expression of aggression), as well as the stimuli from the external environment, are allowed to enter consciousness (the ego) only when they serve the goals and aims of the ego. Thus, in the well-functioning individual, the ego boundaries ensure *aggression in the service of the ego*. Aggression in the service of the ego has meaning over and above what Hartmann refers to as *adaptive aggression* but fits in with his theory of neutralization, which makes the aggressive energy available to the ego. However, it involves more, in that it utilizes the strength of all the ego functions. It also is more than what Fromm refers to as *benign aggression*, since it also implies that aggression can be utilized by the well-integrated ego for self-development and self-actualization without harming others. It has some interfaces with Bellak's explanation of aggression modified by the ego's learned reactions but emphasizes more the exercise of its other perceptual functions.

In terms of perceptual theory, the concept of *perceptual flexibility* (Ittelson and Kutash, 1961) can be related to optimal ego boundary cathexis. The field of criminal law, in its recogni-

discharge of aggressive energy, is, if we take into account the total personality and its position in social reality, a most important prerequisite of mental integration and of mastery of the environment" (p. 72).

Once the ego is sufficiently cathected and established as a functioning organization, the ego and aggression become more closely linked, since the ego organization normally controls mobility, and the muscular apparatus serves as a medium for the discharge of aggression: "Musculature and motility, apparatuses for the discharge of aggression, contribute decisively to the differentiation between self and environment and, through action, to the differentiation of the environment itself. The environment in turn invites action and determines specific areas of action; it thus offers opportunities for the discharge of particular modes of aggression and their individual modifications" (p. 72).

Whether aggressive energy is utilized in a fight reaction to objective danger or results in a flight reaction depends, among other factors, upon the extent of the perceived danger and the strength of the ego. Aggressive energy not discharged in flight may be internalized. It may be used as cathexis of the superego, generating guilt feelings; or it may be neutralized in the ego without interfering with the individual's integrity. Internalized aggressive energy without neutralization can lead to self-destructive impulses.

### **Ego Boundaries and Aggressive Behavior**

Some of the crucial questions raised by those who have addressed the problem of aggression and its manifestations from the psychodynamic point of view are the following: (1) Under what conditions is aggression acted out directly (that is, expressed in overt behavior)? (2) When does aggression remain on a fantasy level and get expressed symbolically and indirectly? (3) Are there two kinds of aggression, which can be labeled benign and malignant, or does an undifferentiated aggressive drive or potentiality become either benign or malignant, depending on how it is channeled or controlled? (4) What determines the outcome of an aggressive drive: the strength of the drive; the built-in defenses; the reality situation, including the existence of objective danger; the quality of the ego organization with its conscious controls and planning capacity; or the value system and the qualities of the superego? (5) Does psychopathology



play an overriding role in producing violence, or is violent behavior a learned or conditioned reaction? A great deal of light can be shed on these questions by focusing on the ego and its intactness or deficiencies, as illustrated by the condition of the ego boundaries. The concept of ego boundaries was described by Federn (1952) in relation to the psychoses and developed further by Gutheil (1958), Zucker (1959), Ivey (1959), and Kutash (1963, 1976).

The ego when fully cathected develops two major boundaries, which enable it to carry out its integrative functions. One of these boundaries differentiates the ego from the id; the other differentiates the ego from outer reality. "In the psychologically well-functioning individual, these boundaries are optimally cathected and flexible, so that the ego functions are properly exercised, including suitable repression and selective admittance into consciousness of primordial and instinctual drives from within and adequate reality testing and cognitive, perceptual experiencing of the external world. The major task of the ego is the successful integration of these pleasure drives and needs from within, with the reality considerations and requirements of the external world" (Kutash, 1965, p. 52). When the ego is thus "optimally cathected," both boundaries serve as "semi-permeable membranes"; the urges, promptings, and impulses from within (including the impulses toward expression of aggression), as well as the stimuli from the external environment, are allowed to enter consciousness (the ego) only when they serve the goals and aims of the ego. Thus, in the well-functioning individual, the ego boundaries ensure *aggression in the service of the ego*. Aggression in the service of the ego has meaning over and above what Hartmann refers to as *adaptive aggression* but fits in with his theory of neutralization, which makes the aggressive energy available to the ego. However, it involves more, in that it utilizes the strength of all the ego functions. It also is more than what Fromm refers to as *benign aggression*, since it also implies that aggression can be utilized by the well-integrated ego for self-development and self-actualization without harming others. It has some interfaces with Bellak's explanation of aggression modified by the ego's learned reactions but emphasizes more the exercise of its other perceptual functions.

In terms of perceptual theory, the concept of *perceptual flexibility* (Ittelson and Kutash, 1961) can be related to optimal ego boundary cathexis. The field of criminal law, in its recogni-

tion of *criminal intent*, also takes into account the ego and its boundaries; that is, a defendant cannot be convicted of a crime unless the prosecutor can prove that the defendant intended consciously to commit it (Branham and Kutash, 1939). Psychological defense consists in demonstrating that the defendant did not know the nature of his act or did not intend to commit the crime (Kutash and Schlesinger, 1977). Analytic psychotherapists and psychoanalysts have demonstrated clinically that people have unconscious homicidal, suicidal, and destructive aggressive fantasies and dreams, but the person with a well-functioning set of ego boundaries does not act out these fantasies. In the neurotic personality, one of these ego boundaries may be insufficiently cathected—too permeable; however, the other boundary is overcathected by defenses that prevent the acting out of “malignant” aggression. When both boundaries are poorly cathected or damaged by excessive conflict and trauma, the individual may then use destructive aggression against others or himself and in some instances, under external eliciting circumstances, resort to bizarre and “senseless” varieties of violence.

From this point of view, all the ego functions—reality testing, accurate appraisal of objective threat, learning, resolution of conflict, decision making, selective use of defenses such as sublimation and displacement, perception and awareness of internal and external stimuli, and others—are available for dealing with the aggressive drive. And, of course, all that we have detailed applies as well to the “libidinal” or sexual drive, although the ego boundary explanation does not depend on acceptance of the libido theory or Freud’s dual instinct theory. It is, however, dependent on an acceptance of unconscious processes, and this is its point of departure from the behaviorists.

In the healthy functioning ego organization, objective danger or threat from the environment is reacted to by either fear or anger—normal emotions in response to such a threat. If the situation is perceived as one that the individual cannot cope with directly, such as an armed holdup, then the emotion experienced is mostly fear. If there is a reasonable chance of overcoming the threat, then the individual feels predominantly angry. Fear leads to a *flight* or avoidance reaction, while anger leads to *fight* or a confrontation. In the neurotic or the person with insufficient ego strength, reality testing is poor; consequently, such a person may exaggerate, imagine, or misperceive the threat and thereby suffer from anxiety (neurotic fear) or

hostility (neurotic anger), which may take a chronic form. In such situations, inappropriate aggression or withdrawal may occur.

In a previous publication (Kutash, 1976, p. 108), I described the effects of an overcathected, too rigid ego-id boundary, whereby the drives from within are repressed in varying degrees and the libido is dammed up. Such a condition may have resulted from early specific trauma or a chronically traumatic or neurotic early childhood situation, in which the major defense of repression was developed and much of the painful material rendered unconscious. A good share of libidinal or psychic energy becomes tied up in maintaining the repressions, leaving an inadequate cathexis of the ego-outer world boundary, which remains too permeable. As a result, the individual develops characteristic symptoms of the hysterical personality structure—such as extreme suggestibility, histrionic displays of emotion, feelings of unreality and identity problems, and tendencies toward dissociation reactions. At the same time, the rigidity of the inner boundary results in sexual naiveté, *belle indifférence*, lack of drive, and conversion symptoms.

If we now turn to the implications of this type of ego boundary imbalance for the aggressive drive, we must emphasize that the sexual urges and the aggressive promptings are repressed, so that the sexually inhibited person is also passive and lacking in drive. The passivity and the repression of aggression contribute to the shallowness of the affect and to the fact that the “emotional” displays are histrionic but not fueled with drive from the inner core of the personality. The ego’s concern is to protect itself against the emergence into consciousness of forbidden sexual and aggressive urges and fantasies. When such a person becomes involved in aggressive activity or violence, it is only as a follower because of his extreme suggestibility. These individuals may be unduly influenced by violent behavior in television and motion picture presentations and newspaper accounts. They may “take on” this behavior also because of their identity problems and their need to follow the leader. The remedy or the preventive measure lies in psychotherapy designed to de-cathect the ego-id boundary by bringing repressed material into consciousness, thus releasing energy for proper cathexis of the ego-outer reality boundary. The restoration of homeostasis or even cathexis of the boundaries makes available to the individual both the sexual and aggressive drives, with the ego in control; thus, the drives are channeled and expressed in

reality-oriented contexts, and aggression in the service of the ego is achieved. The individual becomes less inhibited and more self-actualizing.

In the obsessive-compulsive personality structure, it is the ego-outer world boundary that is too rigid, not sufficiently permeable, or overcathected (Kutash, 1976, p. 109). The individual has erected a barrier between himself and the world around him, bolstered by such character defenses as intellectualization, rationalization, isolation of affect, and compulsions. The inner boundary, by contrast, is too permeable and may be fractured, so that sexual thoughts, homicidal and suicidal ideas, unacceptable fantasies of all types, impulses, and promptings from within continually enter consciousness in the form of obsessions. These are prevented from being acted out in the environment by the relatively impermeable outer boundary. This neurotic arrangement sets up the typical symptomatology of the obsessive-compulsive reaction, in which "the anxiety is associated with the persistence of unwanted ideas and of repetitive impulses to perform acts which may be considered morbid by the patient" (American Psychiatric Association, 1968). The reality-testing capacity of the obsessive-compulsive is preserved at the expense of rigid defenses around the ego-outer world boundary. "Preoccupied as he is with warding off the outside world, he is rigid, incapable of absorbing much that impinges upon him from his environment. His views are extremely conservative since, above all, he is anxious to maintain the existing order" (Guthel, 1958, p. 343).

In this type of ego organization, homicidal fantasies, suicidal preoccupations, sadistic ideas, and a variety of tabooed or forbidden antisocial thoughts herniate into the ego or consciousness, and the individual obsesses continuously without acting on them. He becomes indecisive and is beset with self-doubts and uncertainties. The nonadaptive aggression, which could be disastrous if acted out in reality, remains on a fantasy level. Threats from the environment are handled by denial and negation. Such a person will resort to homicide, suicide, or irrationally violent behavior only when the threat becomes overwhelming and undermines the entire security system of the individual, penetrating the ego-outer world boundary. The obsessive-compulsive personality has then decompensated into paranoid schizophrenia.

In the borderline personality organization (Kernberg, 1975) and in ambulatory schizophrenia, both the ego-id bound-

ary (inner boundary) and the ego-outer world boundary (outer boundary) are unevenly cathected or poorly invested with psychological energy, so that there are "breaks" or "splits" in both ego boundaries. Under stress and under the influence of eliciting environmental circumstances, such individuals are highly likely to express malignant aggression in sometimes bizarre and irrational forms. In these individuals sexually violent acts such as rape may also occur, as well as perverse sexual expressions. *Primary-process* material from the primitive levels of the unconscious may be "acted out" by such individuals in the outer world, resulting in impulsive acts of violence.

The condition of the superego, or censor, also helps to determine whether aggression will be expressed in a malignant or violent manner. The superego represents the incorporation of parental and societal values, the capacity to differentiate what is considered right from what is thought to be wrong. It is partly conscious and partly unconscious. That part of the superego that is repressed into the unconscious operates automatically. When both the ego and the superego are working properly, the superego helps the ego prevent the emergence and acting out of destructive drives and actions that would violate the inherent value system or prove detrimental to the individual by causing extreme guilt and depression or putting him in conflict with the environment and established authority. Thus, defects or insufficiency of the superego may, in cases of psychopathy or criminality, result in malignant aggression or violence. (Cleckley, 1964, has called psychopathy "the psychosis psychiatry refuses to face.")

A theory of aggression must include some explanation of socially sanctioned aggression, such as a war that is officially sponsored by the nations involved; in such an event, each nation considers its war machine and soldiers to be fighting a "just war for human welfare." What happens to the superego's function in ruling out killing? The great majority of young men who volunteer or are conscripted for service in war can kill under these circumstances because of the social sanction and approval that they get for fighting for their country. A few individualists may hold out as conscientious objectors or pacifists, but a person must have a particularly strong ego to be able to "take an unpopular stand." In an unpopular war such as the one in Vietnam, where the social sanction and approval were equivocal, the number of defectors and conscientious objectors was proportionately very high. Thus, in mass aggression the individual

superego is superseded by the authority and sanction of the state, and most citizens as individuals do not have a strong enough autonomous ego to stand up against the state. This form of group aggression has been termed *instrumental aggression* by both Bandura (1973) and Fromm (1973). When the individual feels that he is being enlisted to fight in a just cause with which he identifies strongly, his aggression is considered to be adaptive and in the service of the ego. At the same time, the conscientious objector with a strong ego may also be acting in an adaptive and positive way.

### Psychopathology and Violent Behavior

Destructive aggression occurs with much greater frequency in individuals suffering from various types of severe psychopathology. We will cover briefly some of the more flagrant types of psychogenic psychopathology in relation to violence. (The organic examples are discussed in Chapter Five and elsewhere.) Severe psychopathology is marked by poor or depleted ego strength, inadequately cathected ego boundaries, and/or ego decompensation, so that aggression no longer manifests itself under the control of the ego or conscious mind. In these individuals aggression no longer operates in the service of the ego; instead, the ego is at the mercy of the aggressive impulses.

Many acts of uncontrolled violence occur in individuals suffering from manic-depressive psychosis. In the manic phase, severely afflicted individuals may commit violent acts such as homicide, assault, or destruction of property; in the depressive state, there is a danger of suicide or self-mutilation, depending upon the severity of the depression. There is much evidence for a hereditary predisposition in this illness, but there is also a psychodynamic theory based on the work of Margaret Mahler (Mahler, 1968; Mahler, Pine, and Bergman, 1975). She has traced the cycloid personality and particularly the manic-depressive psychosis to the period in early childhood when the young child is in conflict between feelings of omnipotence and helplessness. When the child feels omnipotent, he feels that he can do anything; he attempts to act upon this assumption but is restrained or controlled by the mother. In the "helpless" mood or phase, the child is completely dependent and feels unable to do anything for himself; he demands mother's help and clings to mother. This can be a trying period for a mother to cope with;

when it is handled inadequately by an immature, depressed, or negligent mother, the basis is laid for wide mood swings and ego weakness, which permits the emotions to take over.

The varieties of schizophrenia, particularly paranoid schizophrenia, also produce an inordinate number of crimes of violence and aggression, so that this form of mental illness—when adequately diagnosed—has served as a legal defense on the basis of the defendant's not knowing the nature of his act and being unable to distinguish right from wrong.

Other psychopathological conditions that produce an inordinate number of violent acts are states known as "epileptic equivalence"; transitory psychotic episodes in borderline and narcissistic personalities; and numerous other disorders marked by loss of ego control over the inner promptings, urges, drives, and impulses. All these disorders have in common a weakness in the ego and a gross impairment of such ego functions as reality testing, judgment, channeling of drives, sublimation, inhibition, and neutralization and fusion of libidinal and aggressive drives. Since most psychopathological conditions related to violence are described adequately in numerous textbooks of psychiatry, it is outside the scope of this chapter to detail them here.

### A Comprehensive Theory of Aggression and Violence

The central concept in an integrated psychodynamic theory of aggression is that of ego strength. A well-functioning ego screens out the stimuli, promptings, and urges from the unconscious as well as the stimuli from the environment and the outer world. To accomplish this purpose, the ego has flexible and evenly cathected boundaries. It has achieved functional autonomy and a keen perception of both bodily processes and outer reality. Healthy or benign aggression, better called self-assertion, is *aggression in the service of the ego*. It is adaptive; that is, it helps the individual achieve a healthy heterosexual adjustment, success in the performance of work and creative activities, and an adequate social life, as well as involvement with the environment and people. It is "fused" adequately with libido, which tends to give it a positive life-supportive direction. Social learning as an ego function enhances the proper channeling of aggression in acceptable, adaptive, rewarding activities. Benign aggression is thus aggression, self-actualization, or self-assertion under the control of the ego and in harmony with a socially adaptive value system or superego.

By contrast, malignant or pathological aggression occurs in individuals with a weak ego, identity problems, and poor ability to control impulses from within or to appraise the reality situation adequately. The weak ego also has a distorted or poorly developed superego. The varieties of partially impaired or immature and overdependent egos that have a high potential for poor impulse control and unrealistic expressions of aggression and violence—the so-called borderline and narcissistic personalities—are described in the book edited by Hartocollis (1977) and can be understood by a thorough study of ego psychology (Blanck and Blanck, 1974). In severely damaged or inadequate egos, as in the psychoses, the potential for malignant aggression and violence is even greater. This theory also encompasses the Adlerian idea that feelings of inadequacy, sibling rivalry, and compensatory masculine strivings may lead to violence, since these are individuals with weak egos. It would also include the acting out of primitive drives, as in Jungian theory. The theories advanced by the “cultural” schools of Erich Fromm and Karen Horney are also applicable, since individuals at odds with the culture but unable to alter or challenge it effectively often suffer from weak egos, poor reality testing, and impotent rages.

Thus, an integrated psychodynamic theory based on ego malfunctioning, ego weakness, immaturity, or damage can encompass other theories and does not rest on whether one regards aggression as an inborn instinct, a drive, a tendency, or a survival mechanism. It is based primarily on the idea that ego control—which includes good cognitive functioning, adequate contact with reality, positive self-regard, a healthy superego, flexible and evenly cathected boundaries, and a host of other ego functions—modifies the aggressive drive or tendency so that it serves adaptive functions and prevents destructive violent behavior. Man’s very survival may depend on a well-functioning conscious ego; the existence of the atomic bomb, for instance, raises the possibility of a violent holocaust set off by men with weak or damaged egos artificially inflated into grandiose, expansive, warped egos.



# Learning and Behavioral Theories of Aggression

*Albert Bandura*



Psychological explanations of aggression have been largely concerned with individual injurious acts that are aversively motivated. In most of these accounts, aggression is attributed to a narrow set of instigators, and the purposes it presumably serves are limited. Inflicting injury and destruction is considered to be satisfying in its own right and therefore the major aim of aggressive behavior. Aggression has many determinants, however, and serves diverse purposes; therefore, theoretical formulations couched in terms of frustrating instigators and injurious aims have limited explanatory power (Bandura, 1973). Social learn-

A version of this chapter was originally published as "Social Learning Analysis of Aggression" in *Analysis of Delinquency and Aggression* (Hillsdale, N.J.: Erlbaum, 1976).

ing provides a general theory intended to be sufficiently broad in scope to encompass conditions governing all facets of aggression, whether individual or collective, personally or institutionally sanctioned.

For purposes of the present discussion, aggression is defined as behavior that results in personal injury and in destruction of property. The injury may take the forms of psychological devaluation and degradation as well as physical harm. Although injury is the major defining property of aggression, it also entails social labeling processes that determine which injurious acts are likely to be judged aggressive. Destructive behavior may be labeled aggressive or not, depending on subjective judgments of whether it is intentional or accidental. In addition, the sex, age, socioeconomic level, and ethnic background of the performer, as well as the value orientations of the labelers, will affect the way in which particular activities are interpreted in everyday life.

People ordinarily do not aggress in conspicuous and direct ways that carry high risks of retaliation. Instead, to protect against counterattack, they tend to hurt others in ways that diffuse or obscure responsibility for detrimental actions. The injurious consequences of major social concern are often caused remotely, circuitously, and impersonally. Thus, for example, individuals who endorse social practices known to have deleterious physical and psychological effects on others are, in their view, exercising democratic prerogatives; but to the victims, who must endure the harmful consequences, they are behaving aggressively. Social scientists have examined direct assaultive behavior in minute detail; but remote circuitous acts, which produce widespread injurious consequences, are seldom considered in analyses of aggression.

Disputes over the labeling of aggressive acts assume special significance in the case of collective behavior. When collective challenges are labeled as lawlessness, coercive countermeasures will be directed against them; if they are designated as warranted protests against inequitable or grievous practices, efforts are more likely to be directed toward effecting social reforms.

A related issue concerns the use of a double standard in judging dissident and institutionally sanctioned aggression. Social agencies are entrusted with considerable coercive power designed to protect the citizenry. Those whose social and economic interests are well served by the system applaud coercive

enforcement practices to maintain social control. In contrast, dissenters who seek social change through collective pressure regard coercive countermeasures by control agents as aggressive acts more intent on preserving the status quo than on impartially protecting the welfare of all segments of society. When the dispensers of unwarranted aggression are sanctioned authorities, their injurious behavior is minimized as vigorous pursuit of duty; when unsanctioned individuals manifest the same behavior, they are apt to be judged as acting violently. In areas of social conflict, one person's violence is another person's social righteousness.

A comprehensive analysis of aggression, then, requires a broader perspective than is usually found in psychological approaches to the problem. A complete theory of aggression must explain how aggressive patterns are developed, what provokes people to behave aggressively, and what maintains their aggressive actions. The determinants of these three separable aspects of functioning are summarized in Table 1 and discussed more fully in the remainder of this chapter.

### Acquisition of Aggressive Modes of Behavior

People are not born with preformed repertoires of aggressive behavior. They must learn them in one way or another. Some of the elementary forms of aggression can be perfected with minimal guidance, but most aggressive activities—whether they be dueling with switchblade knives, sparring with opponents, engaging in military combat, or ridiculing an adversary—entail intricate skills that require extensive learning. People can acquire aggressive styles of conduct either by observing aggressive models or from direct combat experience.

New modes of behavior are not fashioned solely through experience, either of a direct or of an observational sort. Biological structure, which is determined by genetic and hormonal factors, obviously sets limits on the types of aggressive responses that can be perfected. Biological determination of aggression varies across species, however. Animals must rely on their biological equipment for combat successes. In contrast, people's capacity to use destructive weapons and the organized power of numbers has greatly reduced their dependence on physical characteristics for aggressive attainments.

Modeling and reinforcement influences operate jointly in the social learning of aggression in everyday life. Styles of

Table 1. Schematic Outline of the Origins, Instigators, and Reinforcers of Aggression in Social Learning Theory

| <i>Origins of Aggression</i>  | <i>Instigators of Aggression</i>    | <i>Reinforcers of Aggression</i>  |
|-------------------------------|-------------------------------------|-----------------------------------|
| Observational Learning        | Modeling Influences                 | Direct External Reinforcement     |
| Familial influences           | Disinhibitory                       | Tangible rewards                  |
| Subcultural influences        | Facilitative                        | Social and status rewards         |
| Symbolic modeling             | Arousing                            | Alleviation of aversive treatment |
| Learning by Direct Experience | Stimulus Enhancing                  | Expressions of injury             |
|                               | Aversive Treatment                  | Vicarious Reinforcement           |
|                               | Physical assaults                   | Observed reward                   |
|                               | Verbal threats and insults          | Observed punishment               |
|                               | Adverse reductions in reinforcement | Self-Reinforcement                |
|                               | Thwarting of goal-directed behavior | Self-reward                       |
|                               | Incentive Inducements               | Self-punishment                   |
|                               | Instructional Control               | Neutralization of self-punishment |
|                               | Delusional Control                  | Moral justification               |
|                               |                                     | Palliative comparison             |
|                               |                                     | Euphemistic labeling              |
|                               |                                     | Displacement of responsibility    |
|                               |                                     | Diffusion of responsibility       |
|                               |                                     | Dehumanization of victims         |
|                               |                                     | Attribution of blame to victims   |
|                               |                                     | Misrepresentation of consequences |
|                               |                                     | Graduated desensitization         |

aggression are learned largely through observation and are refined through reinforced practice. The powerful effects that these two determinants have on the form and incidence of aggression are graphically revealed in ethnographic reports of societies that pursue a warlike way of life and those that display a pacific style of behavior. In cultures that lack aggressive models and devalue aggressive conduct, people live peaceably (Mead, 1935; Turnbull, 1961). In societies that provide extensive training in aggression, attach prestige to it, and make its use rewarding, people spend a great deal of time threatening, fighting, maiming, and killing each other (Bateson, 1936; Chagnon, 1968; Gardner and Heider, 1968; Whiting, 1941).

*Observational Learning.* Most of the behaviors that people display are learned observationally, either deliberately or inadvertently, through the influence of example. By observing the actions of others, one forms an idea of how the behavior can be performed; on later occasions, then, the representation serves as a guide for action. Laboratory research has been concerned mainly with observational learning of specific aggressive actions. However, models can teach more general lessons as well. From observing the behavior of others, one can learn general strategies for actions that go well beyond the particular modeled examples (Bandura, 1973).

Exposure to aggressive models does not automatically ensure observational learning, for several reasons. First, some people do not gain much from example because they fail to observe the essential features of the model's behavior. Second, some persons are not influenced by observation of a model's behavior because they have no memory of it. Past modeling influences achieve some degree of permanence if they are represented in memory by images, words, or some other symbolic form (Bandura, Grusec, and Menlove, 1966). Mental rehearsal is another means of retaining what has been learned observationally. Assassins in some of the mass slayings originally got the idea from descriptive accounts of a mass killing. The incident evidently remained salient in their thinking long after it had been forgotten by others; it was then repeatedly revived and elaborated in thought until, under appropriate instigating conditions, it served as the basis for an analogous murderous action (*New York Times*, Nov. 13, 1966, p. 1). Even when symbolic representations of modeled activities are developed and retained, however, behavioral enactment may be impeded because the individual

does not have the physical capabilities or the means to carry out the necessary aggressive activities.

Social learning theory distinguishes between (1) the acquisition of potentially destructive and injurious behaviors and (2) factors that determine whether a person will perform what he has learned. This distinction is important because not all the things learned are enacted. People can acquire, retain, and possess the capability to act aggressively, but the learning may rarely be expressed if the behavior has no functional value for them or if it is negatively sanctioned. Should appropriate inducements arise in the future, individuals may put into practice what they have learned (Bandura and Walters, 1963; Madsen, 1968). Thus, in predicting the occurrence of aggression, one should be concerned more with predisposing conditions than with predisposed individuals.

In a modern society three major sources of aggressive behavior—family influences, subcultural influences, and symbolic modeling—are drawn on to varying degrees.

*Familial influences.* Investigators who have studied the familial determinants of antisocial aggression report a much higher incidence of familial aggressive modeling for delinquent than for nondelinquent boys (Glueck and Glueck, 1950; McCord, McCord, and Zola, 1959). That familial violence breeds violent styles of conduct is further shown by similarities in child abuse practices across several generations (Silver, Dublin, and Lourie, 1969). Most assaultive youngsters, however, do not have criminally violent parents. In middle-class families that produce violence-prone offspring, parental aggressive modeling usually takes less blatant forms. The parents of such children favor aggressive solutions to problems, although their actions rarely extend to unlawful performances (Bandura, 1960; Bandura and Walters, 1959). It is in the context of disciplinary activities that children are furnished with vivid parental examples of how to influence the behavior of others. Parents who favor coercive methods have children who tend to use similar aggressive tactics in controlling the behavior of their peers (Hoffman, 1960). There is evidence also that otherwise conforming parents often foster aggressive modes of response by modeling aggressive orientations in word and attitude rather than in deed (Johnson and Szurek, 1952).

*Subcultural influences.* Although familial influences play a major role in setting the direction of social development, the family is embedded in a network of other social systems. The

subculture in which people reside and with which they have repeated contact provides a second important source of aggression. Not surprisingly, the highest rates of aggressive behavior are found in environments where aggressive models abound and where aggressiveness is a highly valued attribute (Short, 1968; Wolfgang and Ferracuti, 1967). In these aggressive subcultures, status is gained primarily through fighting prowess. Consequently, good aggressors are the prestigious models on whom members pattern their behavior, even though the larger society disavows these aggressive styles of conduct. At the same time, most societies maintain elaborate social agencies to which they officially assign aggression-training functions. These include military enterprises with their many supporting subsystems. Military establishments can, in a relatively short period, transform people who have been taught to deplore killing as morally reprehensible into skilled combatants who feel little compunction and even a sense of pride in taking human life. They achieve this transformation not by altering personality structures, drives, or traits but by assigning a high moral purpose to warfare and by providing intensive training in the intricate combat techniques. Training proceeds by demonstration and repeated practice of attacks against simulated targets until proficiency is attained. Throughout this process, recruits are subjected to obedience tests and firmly disciplined for non-compliance.

Although soldiers are returned to civilian life without undergoing a resocialization process designed to instill aggression restraints or to restore commitment to the dignity of human life, most of them promptly revert to their civilian self-evaluative and reinforcement systems and behave in considerate, peaceful ways. Thus, through moral sanctions alone, society can bring about marked shifts in destructive behavior without greatly changing the person. That fact provides striking testimony that the determinants of human aggression are best sought in social practices.

*Symbolic modeling.* Comparative studies show that response patterns portrayed either pictorially or verbally can be learned observationally about as well as those presented through social demonstration (Bandura and Mischel, 1965; Bandura, Ross, and Ross, 1963a). The third source of aggressive behavior, therefore, is the symbolic modeling provided by the mass media, especially television because of its prevalence and vivid portrayal of events. The advent of television has greatly ex-

panded the range of models available to the growing child. Whereas his predecessors, especially those in middle-class homes, had limited opportunity to observe brutal aggression, the modern child has witnessed innumerable stabbings, beatings, stompings, stranglings, muggings, and less graphic but equally destructive forms of cruelty before he has reached kindergarten age. Thus, from televised modeling, both children and adults, regardless of their backgrounds, have unlimited opportunities to learn aggressive coping styles and the whole gamut of felonious behavior in the comfort of their homes. Controlled field studies have shown that exposure to televised violence increases interpersonal aggressiveness (Friedrich and Stein, 1973; Leyens and others, 1975; Parke and others, 1975; Steuer, Applefield, and Smith, 1971) and that people experiencing appropriate inducements often pattern their criminal activities after ingenious styles portrayed in the mass media (Bandura, 1973).

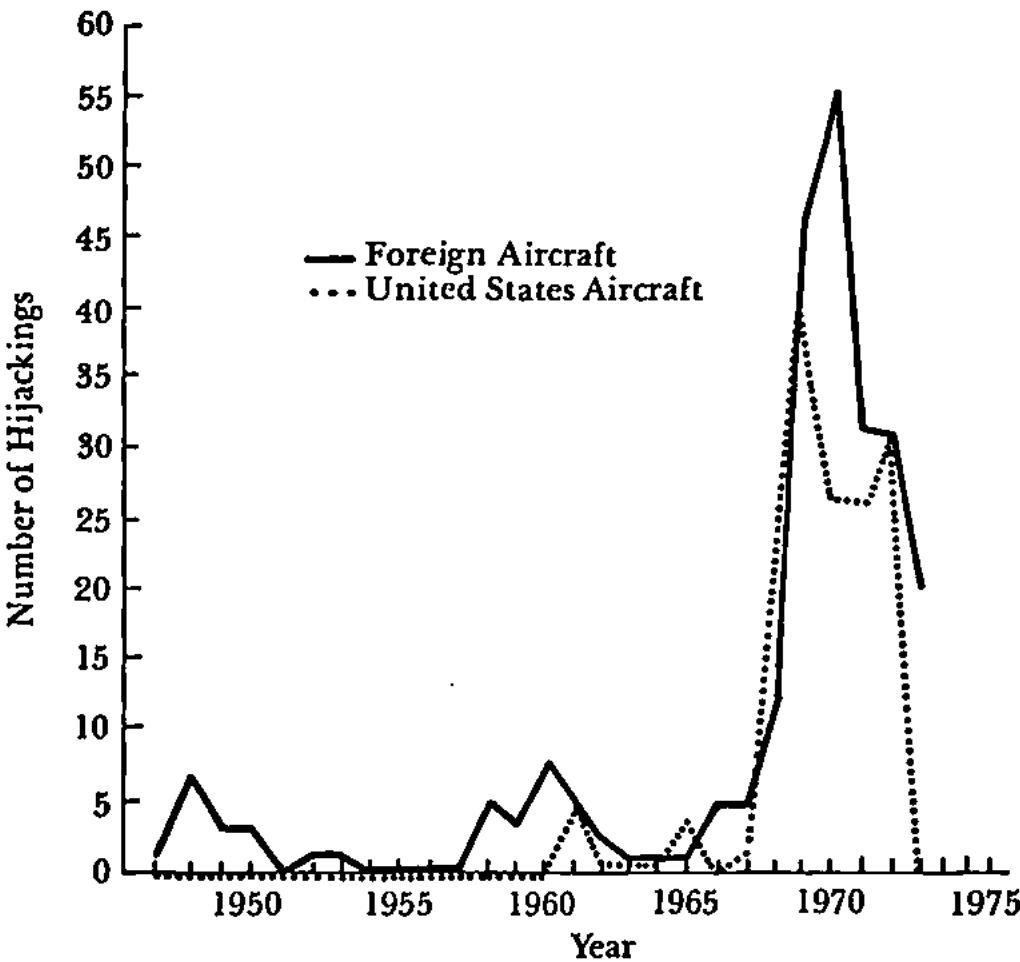
The influence of symbolic modeling is most striking in the shaping and spread of collective aggression. Like most other contagious activities, a new style or tactic of aggression is initiated by a salient example; it spreads at a rapidly accelerating rate; and, after it has been widely adopted, it is discarded, often in favor of a new form that follows a similar course. Or it may spread to other troublesome areas. The civil rights movement, for example, was modeled after Gandhi's crusades of nonviolent resistance and in turn provided the example for other collective-protest campaigns aimed at eliminating injustices and undesired social practices: the antiwar movement and the movements supporting the rights of disadvantaged groups, including Chicanos, Indians, homosexuals, and women. The turbulent 1960s provide numerous additional illustrations of the rapid contagion of the style of collective aggression. The campus protest movement at Berkeley served as the model for the sit-in method of protest at universities throughout the country. The peaceful sit-in was supplanted by progressively more violent forms, graduating to combative disruptions of university functions and, eventually, to the trashing of buildings. Following a New York rally in which construction workers beat up antiwar demonstrators, assaults on students by "hard hats" spread nationwide.

Airline hijacking provides another striking example of the rapid rise and decline of modeled aggression. Air piracy was unheard of in the United States until a commercial airliner was hijacked to Havana in 1961. Prior to this incident there had been numerous hijackings of Cuban airliners to Miami. These



incidents were followed by a wave of hijackings, both in the United States and abroad, reaching its height in 1969, when eighty-seven airplanes were pirated. Thereafter, hijackings declined in the United States but continued to spread to other countries, so that international air piracy became relatively common (Figure 1). News of an inventive hijacker who success-

Figure 1. Incidence of Hijackings over a Span of Twenty-Five Years



*Note:* The rise in foreign hijackings during the 1949-1950 period occurred in Slavic countries at the time of the Hungarian uprising; the second flareup, in 1958-1961, included almost entirely Cuban hijackings to Miami. The sudden widespread diffusion of hijackings in 1969-1970 involved airliners from fifty-five different countries.

fully parachuted from an airliner with a large bundle of extorted money temporarily revived a declining phenomenon in the United States as others became inspired by his successful example (*San Francisco Chronicle*, Nov. 26, 1971).

In Brazil a new form of political collective bargaining was devised when a United States ambassador was abducted and later freed in exchange for political prisoners. This practice quickly spread across Latin America as other consular and ambassadorial envoys were kidnapped in Argentina, Brazil, Guate-

mala, Uruguay, and the Dominican Republic and held hostage for the release of political prisoners. Canada, Spain, and Turkey, containing dissident political factions, soon joined the ranks of South American countries in consular abductions.

There are several alternative explanations for the abrupt decline of contagious aggression. First, the targets of aggression develop effective countermeasures, which are themselves widely modeled. As hijacking escalated, airlines added screening procedures as deterrents. After repeated experiences in dealing with coercive group action, college administrators similarly improved their methods of countercontrol, through court injunctions and new judicial procedures. Second, participants who are drawn into protest activities mainly by their apparent excitement may drop out after experiencing firsthand the full consequences of the endeavor: the long hours of boredom and fatigue, the stress of pressures for conformity, the feeling of isolation that accompanies estrangement from the larger community, and the discouragement arising from failure to achieve desired changes. Third, a new style of behavior rapidly loses its positive value through overuse. When the same rhetoric and tactics are utilized repeatedly, protest activities take on the quality of staged productions rather than genuine expressions of principle. As leaders reduce their authenticity by trite rhetoric, their appeals tend to be viewed as manipulative and increasingly resisted. Some of the more idealistic followers may eventually become disillusioned by the contriving of power plays dictated more by strategic than by moral considerations.

*Learning by Direct Experience.* Although modeling influences are universally present, patterns of behavior can also be shaped through a more rudimentary form of learning—one that relies on the rewarding and punishing consequences of trial-and-error performance. There have been few experimental attempts to fashion novel forms of aggression by differential reinforcement alone. It would be foolhardy to teach novices how to handle firearms or hand grenades by selectively reinforcing their trial-and-error efforts. Where the consequences of errors can be dangerous or fatal, demonstration rather than unguided experience is the best teacher.

Learning through combat experience has been explored to a limited extent in experiments with lower species designed to train docile animals into ferocious fighters (Ginsburg and Allee, 1942; Scott and Marston, 1953). This outcome is achieved by arranging a series of bouts with progressively more

experienced fighters under conditions in which the trainee can win fights without being hurt. As fighting skills are developed and reinforced through repeated victories, formerly noncombative animals become more and more vicious in their aggressive behavior. Whereas successful fighting produces brutal aggressors, severe defeats create enduring submissiveness (Kahn, 1951).

Patterson, Littman, and Bricker (1967) reported a field study in which passive children were shaped into aggressors through a process of victimization and successful counteraggression. Passive children who were repeatedly victimized, and whose counteraggression often proved effective in halting attacks, not only increased defensive fighting but eventually began to initiate attacks of their own. In contrast, passive children who were seldom maltreated because they avoided others, and those whose counteraggressive responses were unsuccessful, remained submissive in their behavior.

### Instigators of Aggression

A theory must explain not only how aggressive patterns are acquired but also how they are activated and channeled. Most of the events that provoke people to aggress—such as insults, verbal challenges, status threats, unjust treatment, and inciting actions—gain this activating capacity through learning experiences rather than from genetic endowment. People learn to dislike and to attack certain types of individuals, either through direct unpleasant encounters with them or on the basis of symbolic and vicarious experiences that conjure up hatreds. In addition to paired experiences, stimuli gain aggression-directing functions through association with differential response consequences. When aggression is treated differently depending on the times, places, or persons toward whom it is directed, such informative cues come to signify probable consequences, and people regulate their behavior accordingly. They tend to aggress toward persons and in contexts where it is relatively safe and rewarding to do so, but they are disinclined to act aggressively when to do so carries a high risk of punishment. The different forms that aggression elicitors take are discussed separately in the sections that follow.

*Modeling Influences.* Human behavior is extensively under modeling stimulus control. Therefore, an effective way to prompt people to aggress is to have others do it. Results of numerous laboratory studies generally show that both children and adults

behave more punitively after they have seen others act aggressively than if they have not been exposed to aggressive models (Bandura, 1973; Goranson, 1970). The eliciting power of modeling influences is enhanced under conditions where observers are angered (Berkowitz, 1965a; Hartmann, 1969; Wheeler, 1966), where the modeled aggression is socially justified (Berkowitz, 1965a; Meyer, 1971), or where the victim invites attack through prior association with aggression (Berkowitz, 1970b). The findings of laboratory studies are essentially corroborated by well-designed field experiments. People who are repeatedly exposed to combative models tend to be more physically assaultive in their social interactions than those who observe non-violent styles of conduct.

In many instances behaving as others do is rewarding because the prevalent modes have proved most functional, whereas divergent courses are less effective or may even bring disapproval. Aggressive behavior, especially when it is cruel and lacks justification, often is socially censured if not self-condemned; and anticipated punishment exerts a restraining influence on injurious conduct. However, social learning theory distinguishes four processes by which modeling influences do not restrain but instead can activate aggressive behavior. First of all, it has been shown that exposure to models engaging in threatening activities without adverse consequences has a *disinhibitory* effect on observers by extinguishing their fears vicariously (Bandura, 1971a). Somewhat similarly, when an individual sees others respond approvingly toward aggressors, he assumes that such behavior is not only acceptable but even expected in the situation. In such instances—that is, when aggressive conduct is regarded as emulative and therefore unencumbered by restraints—aggressive modeling is primarily *facilitative*. Again, the sight of aggressive behavior in others generates *emotional arousal* in observers; under conditions where individuals are prone to behave aggressively, any source of emotional arousal can enhance aggressive responding (Tannenbaum, 1972; Zillmann, 1971). Aggressive modeling can additionally increase the likelihood of aggressive behavior through its *stimulus-enhancing effects*. Modeled activities inevitably direct observers' attention to the particular implements being used. This directive attentional influence may prompt observers to use the same instruments to a greater extent, although not necessarily in an imitative way. In one experiment (Bandura, 1962), for example, children who had observed a model pummel a plastic figure

with a mallet spent more time pounding other objects with a mallet than those who did not see it used for assaultive purposes.

*Aversive Treatment.* Frustration, which is widely invoked as a principal cause of aggression, subsumes such a diverse set of conditions that it no longer has a specific meaning. Painful treatment, deprivation or delay of rewards, personal insults, failure experiences, and obstructions—all of which are regarded as frustrations—do not have uniform behavioral effects (Bandura, 1969). Even the same treatment can elicit different responses at different intensities and under different learning histories. The heterogeneous events included under the omnibus term *frustration* do have one property in common; they are all aversive in varying degrees.

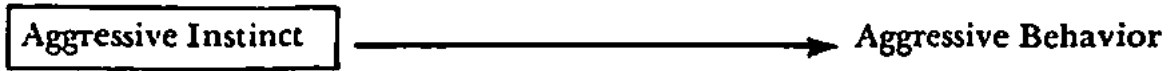
Social learning theorists, then, do not hold that frustration generates an aggressive drive that is reducible only by injurious behavior; instead, they believe that aversive treatment creates a general state of emotional arousal, which can facilitate a variety of behaviors, depending on the types of responses the person has learned for coping with stress and their relative effectiveness (Bandura, 1973). When subjected to adversity, some people seek help and support; others increase achievement efforts; others display withdrawal and resignation; some aggress; others experience heightened somatic reactivity; and still others anesthetize themselves against a miserable existence with drugs or alcohol. Most people, however, intensify constructive efforts to overcome sources of distress. Figure 2 depicts schematically three different views of the motivational components of aggression. Several lines of evidence, reviewed in detail elsewhere (Bandura, 1973), lend greater validity to the *arousal-prepotent response* formulation (espoused by social learning theory) than to the *frustration-aggression* view (espoused by instinct theory and drive theory).

Different forms of aversive stimulation often have dissimilar behavioral effects. Therefore, in the social learning analysis injurious behavior is related to different classes of aversive antecedents. The overall evidence regarding these different forms of aversive instigators supports the conclusion that aversive antecedents, although they vary in their activating potential, are facilitative rather than necessary or sufficient conditions for aggression.

*Physical assaults.* If one wishes to provoke aggression, he can simply hit another person, who is likely to oblige with a

**Figure 2. Diagrammatic Representation of Motivational Determinants of Aggression in Instinct, Reaction Drive, and Social Learning Theories**

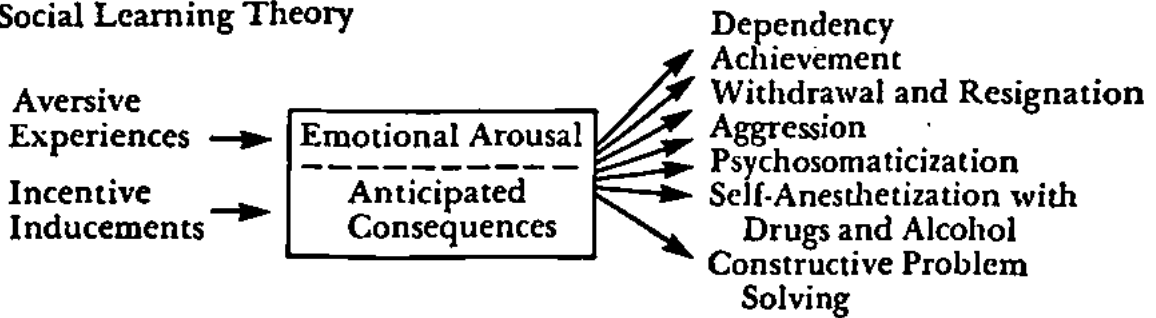
**Instinct Theory**



**Drive Theory**



**Social Learning Theory**



counterattack. To the extent that counteraggression discourages further assaults, it is reinforced by pain reduction and thereby assumes high functional value in social interactions. Although naturally occurring contingencies favor the development of a strong pain-aggression relationship, there is some dispute over whether pain-induced aggression is innate or acquired.

Azrin (1967) and Ulrich (1966) are major proponents of the nativistic view that pain-induced aggression is an unlearned reflexive behavior. As the determinants of pain-attack reactions are examined more closely, however, they begin to lose their reflexive status. Young animals rarely, if ever, fight when shocked unless they have had some fighting experience, and in some studies shocks produce little or no fighting in 20-30 percent of mature animals (Hutchinson, Ulrich, and Azrin, 1965; Powell and Creer, 1969). If aggression is an unlearned dominant response to pain, initial shocks should produce attack, which is not generally the case (Azrin, Hutchinson, and Hake, 1963). Contrary to the reflexive elicitation hypothesis, when attack responses are shocked, the painful stimulation reduces and eliminates rather than provokes aggression (Azrin, 1970; Baenninger and Grossman, 1969). The most striking evidence that pain-aggression reactions are determined more by situational factors than by innate organization is the finding that in a small enclosure approximately 90 percent of the shocks provoke fighting,

whereas in a larger chamber animals ignore each other and only 2 percent of the shocks elicit attack (Ulrich and Azrin, 1962). As environmental inducements to fight are removed, avoidance and flight responses to painful treatment take priority over attack (Knutson, 1970; Logan and Boice, 1969). Physically painful experiences are facilitative but clearly not sufficient to provoke aggression in animals.

Painful stimulation is an even less consistent elicitor of aggression in humans. Whether or not they counteraggress in the face of physical assaults depends on their combat success and the power of their assailant. Those who have been successful in controlling people through force escalate their counterattacks to compel acquiescence (Edwards, 1967; Peterson, 1971). Given other options, low aggressors are easily dissuaded from making counterattacks under retaliative threats.

*Verbal threats and insults.* Social interchanges are typically escalated into physical aggression by verbal threats and insults. The counterattacks evoked by physical assaults are probably instigated more by humiliation than by physical pain. Indeed, it is not uncommon for individuals, and even nations, to pay heavy injury costs in efforts to "save face" by combat victory. In analyzing the dyadic interchanges of assault-prone individuals, Toch (1969) found that humiliating affronts and threats to reputation and manly status emerged as major precipitants of violence. In addition to their high sensitivity to devaluation, these individuals usually lacked skills for resolving disputes and restoring self-esteem by verbal means. Insult alone is less effective in provoking attack in those who eschew aggression, but it does heighten aggressive responding when hostile modeling and other disinhibitory influences are present (Hartmann, 1969; Wheeler and Caggiula, 1966). In subcultures where social ranking is determined by fighting prowess, status threats—from challengers within the group or from rival outsiders—are quick to provoke defensive aggression (Short, 1968).

How do insults acquire aggression-eliciting potential? The most plausible explanation involves the consequences of a failure to retaliate. Affronts that are not successfully counteracted can have far-reaching effects for victims. Not only do these victims become easy targets for further victimization but they may forfeit the rewards and privileges that go with social standing. To the extent that punishment of insults by counteraggression reduces the likelihood of future maltreatment, the insult-aggression reaction becomes well established.

*Adverse reductions in reinforcement.* Aversive conditions

of life can also provoke people to aggressive action. Explanations of collective aggression characteristically invoke impoverishment and discontent arising from privations as principal causal factors. Considering that most discontented people do not aggress, however, the view that discontent breeds violence requires qualification. This issue is well illustrated in interpretations of urban riots in ghetto areas. Despite their degrading and exploited conditions of life, comparatively few of the sufferers take active measures to force warranted changes. A vast majority of the disadvantaged do not engage in disruptive public protest; even in cities experiencing civil disturbances, only about 15-20 percent of ghetto residents actively participated in the aggressive activities (Lieberson and Silverman, 1965; McCord and Howard, 1968; Sears and McConahay, 1969).

The critical question for social scientists to answer is not why some people who are subjected to aversive conditions aggress, but why a sizable majority of them acquiesce to dismal living conditions in the midst of affluent styles of life. To facilely invoke the frustration-aggression hypothesis, as is commonly done, is to disregard the more striking evidence that severe privation generally produces feelings of hopelessness and widespread resignation. Pervasive discontent may be a necessary but not a sufficient cause of collective aggression.

Comparative studies indicate that discontent produces aggression not in those who have lost hope but in the more successful members, whose assertive efforts at social and economic betterments have been periodically reinforced and who, consequently, have some reason to expect that coercive action can force additional social change (Caplan, 1970; Crawford and Naditch, 1970). In addition, current explanations of violent protest emphasize relative deprivation, rather than the actual level of aversive conditions, as the instigator of collective aggression. In an analysis of conditions preceding major revolutions, Davies (1969) reports that revolutions are most likely to occur when a period of social and economic advances that instills rising expectations is followed by a sharp reversal. Finally, people judge their present gains not only in relation to those they secured in the past but also in relation to the benefits accruing to others (Bandura, 1971c). Unfavorable discrepancies between observed and experienced outcomes tend to create discontent, whereas individuals may be satisfied with limited rewards as long as they are as good as, or better than, what others are receiving.



Because most people who feel relatively deprived do not resort to violent action, aversive privations contribute to aggression in interaction with other inducements rather than as an independent determinant. Gurr (1970a) examined three determinants of the magnitude of civil disorders: the level of social discontent, traditional acceptance of forcible tactics to achieve desired reforms, and the balance of coercive power between the regime and the challengers. The multifaceted analysis disclosed that, when forcible tactics are considered acceptable, challengers who possess coercive power will use collective force to change social practices within a system, regardless of the level of discontent. Revolutionary violence, however, requires widespread discontent and dissident coercive power, whereas tactical traditions are of less importance.

Response to inequitable deprivation is further influenced by, among other factors, the social justification and promise of social reforms. Considering the complex interplay of influences, it is hardly surprising that level of deprivation alone, whether defined in absolute or in relative terms, is a weak predictor of collective aggression (McPhail, 1971).

*Thwarting of goal-directed behavior.* Proponents of the frustration-aggression theory define frustration in terms of interference or blocking of goal-seeking activities. In this view, people are provoked to aggression when they are obstructed, delayed, or otherwise thwarted from getting what they want. Research bearing on this issue shows that thwarting can lead people to intensify their efforts, which, if sufficiently vigorous, may be construed as aggressive. However, thwarting fails to provoke forceful action in people who have not experienced sufficient positive reinforcement to develop reward expectations and in those who are blocked far enough from the goal that it appears unattainable (Bandura and Walters, 1963; Longstreth, 1966).

In instances where thwarting provokes aggression, it is probably attributable more to the implied personal insults than to blocking of ongoing behavior. Consistent with this interpretation, people report more aggression to thwartings that appear unwarranted than to those for which excusable reasons exist, even though both involve identical blocking of goal-directed behavior (A. R. Cohen, 1955; Pastore, 1952).

*Incentive Inducements.* The preceding discussion was concerned solely with aversively motivated aggression, which occupies a more prominent role in psychological theorizing than is war-

ranted empirically. The cognitive capacity of humans to represent future consequences enables them to guide their behavior by outcomes extended forward in time. A great deal of human aggression, in fact, is prompted by anticipated positive consequences. Here the instigator is the pull of expected reward rather than the push of painful treatment. This positive source of motivation for aggression represents the second component in the motivational analysis depicted under "Social Learning Theory" in Figure 2.

The consequences that people anticipate for their actions are derived from, and therefore usually correspond to, prevailing conditions of reinforcement. This aspect of aggression receives detailed consideration later in this chapter. It should be noted, however, that anticipated outcomes are also partly inferred from observed consequences of others, from what one reads or is told, and from many other cues that in past experience have been reliable forecasters of likely outcomes. Consequently, since judgments based on these inferences are fallible, aggressive actions are sometimes prompted and temporarily sustained by erroneous anticipated consequences. Habitual offenders, for example, often err by overestimating the chances of success for transgressive behavior (Claster, 1967). In collective protest, coercive actions are partly sustained, even in the face of punishing consequences, by expectations that continued pressure may eventually produce social reforms.

*Instructional Control.* During the process of socialization, people are trained to obey orders. When obedience to directives is rewarded and noncompliance is punished, orders eventually acquire eliciting power. After this form of social control is established, legitimate authorities can successfully command aggression from others, especially if actions are presented as justified and necessary and the agents possess strong coercive power. As Snow (1961, p. 24) has perceptively observed, "When you think of the long and gloomy history of man, you will find more hideous crimes have been committed in the name of obedience than in the name of rebellion."

In his studies of obedient aggression, Milgram (1974) has shown that well-meaning adults will administer increasingly severe shocks on command, despite their victims' desperate pleas. Adults find it difficult to behave counter to peer pressures calling for increasingly hurtful actions, just as they are averse to defying legitimized authority. Their obedient aggression is increased when they see others carry out punitive orders calmly (Powers and Geen, 1972).

It is relatively easy to hurt people on command when their suffering is not visible and when causal actions seem physically or temporally remote from their deleterious effects. Mechanized forms of warfare, where masses of people can be put to death by destructive forces released remotely, illustrate such depersonalized aggression. When the injurious consequences of one's actions are fully evident, vicariously aroused distress and loss of self-respect serve as restraining influences over aggressive conduct that is otherwise authoritatively sanctioned. Milgram (1974) obtained diminishing obedience as the harmful consequences of punitive actions became increasingly more salient and personalized. The results of his study, and other studies to be cited later, show that it requires particular social conditions rather than monstrous people to produce heinous deeds.

*Delusional Control.* In addition to the various external instigators, aggressive behavior can come under bizarre symbolic control; that is, individuals may be led by delusional beliefs to commit acts of violence. Some follow divine inner voices commanding them to murder. Others are instigated to self-protective attacks by paranoid suspicions that others are conspiring to harm them (Reich and Hepps, 1972). Still others are prompted by grandiose convictions that it is their heroic responsibility to eliminate maleficent individuals in positions of power.

A study of presidential assassins (Weisz and Taylor, 1969) shows that, with one exception, the murderous assaults were partly under delusional control. The assassins acted either under divine mandate, through alarm that the president was in conspiracy with treacherous foreign agents to overthrow the government, or on the conviction that their own adversities resulted from presidential persecution. Being unusually seclusive in their behavior, the assassins effectively shielded their erroneous beliefs from corrective influences.

### Reinforcers of Aggression

The third major feature of the social learning formulation is concerned with the conditions that sustain aggressive responding. As has been amply documented in psychological research, behavior is extensively controlled by its consequences. The principle applies equally to aggression. Aggressive modes of response, like other forms of social behavior, can be induced, eliminated, and reinstated when the effects they produce are altered (Bandura, 1973).

People aggress for many different reasons. Essentially the same aggressive actions may thus have markedly different functional value for different individuals, and for the same individual on different occasions. In traditional theories, reinforcement influences are largely confined to the effects of external outcomes impinging directly on the performer. Social learning theory, however, distinguishes three forms of reinforcement control: the influence of direct external reinforcement, vicarious or observed reinforcement, and self-reinforcement.

*Direct External Reinforcement.* Aggression is strongly influenced by its direct consequences, which take many forms. Extrinsic rewards assume special importance in interpersonal aggression because such behavior, by its very nature, generally creates some painful costs. A person who gets into fights may suffer injury even though he eventually triumphs over his opponents. Under noncoercive conditions, positive incentives are needed to overcome inhibitions arising from the aversive concomitants of aggression.

*Tangible rewards.* People often resort to aggressive action because it is an effective means of securing desired tangible rewards. Ordinarily docile animals will fight when aggressive attacks produce food or drink (Azrin and Hutchinson, 1967; Ulrich and others, 1963). Observation of children's interactions shows that approximately 80 percent of the aggressors' assaultive actions produce rewarding consequences for them (Patterson, Littman, and Bricker, 1967). Given this surprisingly high level of positive reinforcement of aggressive behavior, there is no need to invoke an aggressive drive to explain the prevalence of such actions. Aggressive behavior is especially persistent when it is reinforced only intermittently, which is usually the case under the variable conditions of everyday life (Walters and Brown, 1963).

Other forms of aggression are similarly sustained by their material consequences, although, for obvious reasons, they are not easily subject to systematic analysis. Delinquent and adult transgressors, for example, can support costly drug habits on income derived from aggressive pursuits; protesters can secure, through forceful collective response, social reforms that affect their lives materially; and nations are sometimes able to gain control over prized territories through warfare.

*Social and status rewards.* Some aggressive behaviors are maintained because they win approval and status rewards. People commended for punitive actions toward others become

progressively more aggressive, whereas they display a relatively low level of aggression when their actions are not treated as praiseworthy (Geen and Stonner, 1971; Staples and Walters, 1964). Aggressive responses, if socially reinforced, increase in frequency; and the reinforcement tends to enhance other forms of aggression as well (Geen and Pigg, 1970; Loew, 1967).

Analyses of social reinforcement of aggressive behavior in natural settings generally agree with results of laboratory studies. Parents of assaultive children generally do not condone aggressive behavior in the home; but they do condone, actively encourage, and reinforce provocative and aggressive actions toward others in the community (Bandura, 1960; Bandura and Walters, 1959). In aggressive gangs, members achieve status and recognition through their skills in fighting (Short, 1968). During wartime, otherwise compassionate societies offer medals, promotions, and social commendations on the basis of skill in killing. In the Nazi structure of reinforcement, where enslavement and execution of racial minorities were viewed as meritorious acts of patriotism, promotions in concentration camps were made partly on skill in performing mass murders. Camp commandants proudly compared execution rates as if they were industrial production figures (Andrus, 1969). Lest the Nazi atrocities be dismissed as an anomalous product of a deranged social system, it should be noted that otherwise socialized people can be led to behave brutally and to take pride in such actions when reinforcement practices are instituted that favor inhuman forms of behavior (see "A Badge for Killing Reds," *San Francisco Chronicle*, June 11, 1970, p. 23).

*Alleviation of aversive treatment.* People are frequently subjected to distressing treatment from which they seek relief. Coercive action that is not unduly hazardous is the quickest and most direct means of alleviating adverse conditions, if only temporarily. Defensive forms of aggression are often reinforced by their capacity to terminate humiliating and painful treatment. Reinforcement through pain reduction is well documented in studies showing that children who are often victimized but terminate the maltreatment by successful counteraggression eventually become highly aggressive in their behavior (Patterson, Littman, and Bricker, 1967).

In the social learning analysis, defensive aggression is sustained to a greater extent by anticipated consequences than by its instantaneous effects. People will endure reprisals on expectations that their aggressive efforts will eventually remove dele-

terious conditions. Aggressive actions may also be partly maintained in the face of painful counterattack by anticipated costs of timidity. In aggression-oriented circles, failure to fight back can arouse fear of future victimization and humiliation. A physical pummeling may, therefore, be far less distressing than repeated social derision or self-contempt. In other words, humans do not behave as unthinking servomechanisms directed solely by immediate response feedback. Under aversive conditions of life, people will persist, at least for a time, in aggressive behavior that produces immediate pain but prospective relief from misery.

*Expressions of injury.* Proponents of drive theories contend that the purpose of aggression is injury. It is therefore widely assumed that aggressive behavior is reinforced by signs of suffering in the victim. According to Sears, Maccoby, and Levin (1957), pain cues become rewarding through their repeated association with tension relief and removal of frustrations. Feshbach (1970), however, interprets the rewarding value of pain expression in terms of self-esteem processes. Perception of pain in one's tormentors is experienced as satisfying because successful retaliation restores the aggressor's self-esteem.

A contrasting view is that signs of suffering ordinarily function as inhibitors rather than as positive reinforcers of aggressive behavior. Because of the potential dangers of violence, all societies punish cruel and destructive acts, except under special circumstances. In the course of socialization, most people adopt societal standards that regard ruthless aggression as morally reprehensible. Consequently, aggression that produces suffering in others elicits both fear of retaliation and self-condemnation, which tend to inhibit injurious attacks.

Studies of the effect of pain expressions by suffering victims support the inhibitory view; that is, aggressors behave less punitively when their victims express anguished cries than when they suffer in silence (Baron, 1971a, 1971b; Geen, 1970). Contrary to drive theory, pain cues reduce aggression regardless of whether the assailant is angered or not. People are even less inclined to behave cruelly when they see their suffering victims than when they merely hear the distress they have caused them (Milgram, 1974).

The scope of the experimental treatments and the populations studied are too limited to warrant the strong conclusion that pain expressions never serve as positive reinforcers of aggressive behavior. A gratuitous insult from a stranger in a labora-

tory may not create sufficient animosity for the victim to derive satisfaction from injurious retaliation. It is a quite different matter when an antagonist repeatedly tyrannizes others or wields his power in ways that make life miserable for them. In such instances, news of the misfortune, serious illness, or death of an oppressor is joyfully received by people who ordinarily respond more compassionately to the adversities befalling others. However, the alleviation of aversive treatment from an injured oppressor, rather than his suffering, may be the primary source of satisfaction. In experimental investigations pain expression occurs without the other extraneous rewards accompanying victory over antagonists.

From the standpoint of social learning theory, suffering of one's enemies is most likely to be rewarding when hurting them relieves discomfort or benefits aggressors in other ways. When aggressors suffer reprisals or self-contempt for harming others, signs of suffering function as negative reinforcers that deter injurious attacks.

Under certain conditions, however, pain expressions may assume positive reinforcing properties. Examples can be cited of societal practices where cruel acts are considered praiseworthy by those in positions of power. Such bizarre reinforcement contingencies can breed people who take pleasure in inflicting pain and humiliation. Some of the most horrid illustrations of this phenomenon are documented in the proceedings of the Nuremberg trials. A commandant at Auschwitz, for example, had a window installed in a gas chamber so that he could watch the gruesome massacres (Andrus, 1969). Additionally, clinical studies of sexual perversion have disclosed cases in which pain expressions acquire powerful rewarding value through repeated association with sexual gratification. In these cases, the individual derives erotic pleasure from inflicting pain on others or on himself.

There are no conceptual or empirical grounds for regarding aggression maintained by certain reinforcers as more genuine or important than others. A comprehensive theory must account for all aggressive actions, whatever purposes they serve. To restrict analysis of aggression to behavior that is reinforced by expressions of injury is to exclude from consideration some of the most violent activities, where injury is an unavoidable concomitant rather than the major function of the behavior.

Questions also arise about the distinction traditionally drawn between "instrumental" aggression, which is supposedly

aimed at securing extraneous rewards, and "hostile" aggression, the sole purpose of which is presumably to inflict suffering (Feshbach, 1970). In all instances, the behavior is instrumental in producing certain desired outcomes, be they pain, status rewards, or material gain. It would be more accurate to designate aggressive behaviors in terms of their functional value rather than whether or not they are instrumental.

*Vicarious Reinforcement.* People repeatedly observe the actions of others and the occasions on which they are rewarded, ignored, or punished. Observed outcomes influence behavior in much the same way as directly experienced consequences (Bandura, 1971c; Kanfer, 1965). People can, therefore, profit from the successes and mistakes of others as well as from their own direct experiences. In general, seeing aggression rewarded in others increases, and seeing it punished decreases, the tendency to behave in similar aggressive ways (Bandura, 1965; Bandura, Ross, and Ross, 1963b). The more consistent the observed response consequences, the greater are the facilitatory and inhibitory effects on viewers (Rosekrans and Hartup, 1967).

Vicarious reinforcement produces its behavioral effects through several mechanisms (Bandura, 1971b). First of all, it conveys information to observers about the types of actions likely to be approved or disapproved and the specific conditions under which one can perform them. Second, if observers see that someone is rewarded for certain behavior, the vicarious reinforcement is motivational; it encourages observers to believe that they can gain similar rewards for analogous performances. Finally, if observers see that someone escapes punishment for an aggressive act, the vicarious reinforcement is disinhibitory. Indeed, the legal system of deterrence rests heavily on the restraining (or inhibiting) function of exemplary punishment (Packer, 1968).

A number of social factors may substantially alter the customary effects of observed consequences. Models and observers often differ in distinguishable ways, so that behavior considered approvable for one may be punishable for the other, depending on differences in sex, age, and social status. When the same behavior produces unlike consequences for different members, observed reward may not enhance the level of imitative aggressiveness (Thelen and Soltz, 1969).

Under some circumstances, observed punitive treatment raises rather than lowers aggression. When societal agents misuse their power to reward and punish, they undermine the legiti-



macy of their authority and generate strong resentment. In such instances, the sight of inequitable punishment—instead of prompting compliance—may free incensed observers from self-censure of their own actions and thus increase aggressive behavior. Indeed, leaders of protest movements sometimes attempt to rally supporters to their cause by selecting aggressive tactics calculated to provoke authorities to punitive actions.

Ordinarily, observed punishment tends to devalue the models and their behavior, whereas the same models assume emulative qualities when their actions are rewarded. However, aggressors may gain rather than lose status in the eyes of their peers when they are punished for a style of behavior valued by the group or when they aggress against social practices that violate the professed values of society. It is for this reason that authoritative agencies are usually careful not to discipline challengers in ways that may martyr them.

The manner in which aggressors respond to the consequences of their behavior can also influence the way in which observers later react when they themselves are rewarded for displaying similar responses. Ditricks, Simon, and Greene (1967) report that children who observe models express progressively more hostility for social approval later increase their own output of hostile response under positive reinforcement. However, when models reduce the hostile responses that bring them praise, or react in random fashion as though they are uninfluenced, observers do not increase their expression of hostility, even though they are praised whenever they do so. Susceptibility to direct reinforcement, therefore, can be increased by observed willing responsiveness but reduced by observed resistance.

*Self-Reinforcement.* A theory that viewed the performance of aggression solely in terms of external rewards and punishments would be incomplete, because humans can, and do, regulate their own actions to some extent by self-produced consequences. They do things that give them self-satisfaction and a feeling of self-worth, and they refrain from behaving in ways that result in self-criticism and other self-devaluative consequences. Because of self-reactive tendencies, aggressors must contend with themselves as well as with others when they behave in an injurious fashion.

One can distinguish several ways in which self-generated consequences enter into the self-regulation of aggressive behavior. At one extreme are individuals who have adopted self-

*Attribution of blame to victims.* Attribution of blame to victims is still another expedient that can be used for self-assuaging purposes. In this process, aggressors see themselves as essentially persons of goodwill who are forced into punitive actions by villainous adversaries. Victims are condemned for bringing the suffering on themselves, either by their character defects or by their witless and provocative behavior. Observers of victimization can be affected in much the same way as the aggressors. Seeing victims suffer punitive treatment for which they are held partially responsible leads observers to devalue them (Lerner, 1971; Piliavin, Hardyck, and Vadum, 1967). The indignation aroused by ascribed culpability, in turn, provides moral support for even more brutal acts by aggressors.

*Misrepresentation of consequences.* After people have aggressed, additional self-placating measures are available that operate principally through misrepresentation of the consequences of their actions. When people are prompted to self-disapproved conduct under conditions in which they have some choice on whether or not to behave that way, they tend to minimize injurious consequences and to recall potential benefits but not the harm of punishing courses of action (Brock and Buss, 1962, 1964). As long as the damages that aggressors cause are disregarded or belittled, they have little reason to engage in self-censuring reactions.

*Graduated desensitization.* The aforementioned practices do not instantaneously transform a gentle person into a brutal aggressor. Rather, the change is usually achieved through a gradual desensitization process in which the participants may not fully recognize the marked changes they have undergone. Initially, individuals are prompted to perform aggressive acts that they can tolerate without excessive self-censure. After their discomfort and self-reproof are extinguished through repeated performance, the level of aggression is progressively increased in this manner—until, eventually, deeds originally regarded as abhorrent can be performed without much distress.

### Conclusion

It is commonly assumed that societies can best prevent violence by instilling principled morality and a sense of fellowship in individuals. And, admittedly, people generally will not behave aggressively toward their friends and associates in the face of provocation from external sources (Davitz, 1952;

Wright, 1942). However, just as high moral principles can be used to support ruthless activities, positive bonds can heighten aggressiveness. The mutual support of close friendship reduces restraints against aggressing toward a common foe. As Wright (1942) has demonstrated, close friends are more abusive toward their antagonists than are groups with weaker friendship ties.

Given the variety of self-disinhibiting devices, then, a society cannot rely solely on individuals, however noble their convictions, to protect against brutal deeds. Just as aggression is not rooted in the individual, neither does its control reside solely there. Humaneness requires, in addition to benevolent personal codes, safeguards built into social systems that uphold compassionate behavior and discourage cruelty.

Like many other problems confronting man, there is no single grand design for lowering the level of destructiveness within a society. It requires both individual corrective effort and group action aimed at changing the practices of social systems. Because aggression is not an inevitable or unchangeable aspect of man, but a product of aggression-promoting conditions operating within a society, social learning theory holds a more optimistic view of people's power to reduce their level of aggressiveness. But much greater effort is needed to ensure that this capability is used beneficially rather than detrimentally.

# Sociological Theories of Aggression

*Eli Osman*  
*Ching-tse Lee*



This chapter will present our view of what paths might be pursued in the development of sociological theories of aggression. There is no abundance of literature on formal theories that deal with aggression in a sociological framework, given our opinion of what a useful sociological theory should be. Thus, we shall attempt no complete literature review but, rather, will speculate on the possibilities of developing such theories or molding theories with formal structures so that they are applicable to the description of aggression, as we shall view it. Our discussion is intentionally loosely structured and our examples highly selective. We intend to raise questions that may not be answerable for some time to come. Our discussion hinges on the choice of meaning for the terms *sociological*, *theory*, and *aggression*.

By *sociological*, we mean a focus on the effects of social

systems variables on aggressive behavior perpetrated by individuals, groups, organizations, or societies. Thus, we are not immediately concerned with such matters as the human animal's biological predisposition to aggression, the mechanisms relating frustration to aggression in individuals, or the social learning principles underlying the development of aggressive behavior patterns at the level of the single human. We assume here that individual man is potentially aggressive and that the ongoing biological and psychological processes constitute the sphere of actions and interactions for sociological forces.

The focus of sociological forces can be either on "individual man" or on "statistical man." If we focus on individual man—a particular human being, a complex biological-psychological stochastic state process—we may then develop theories that concentrate on the effects of sociological forces on that particular process. Such a task would be difficult, since the body of propositions constituting the theoretical description would depend on the individual chosen (for example, Jimmy Carter, Richard Nixon, or Adolf Hitler). If we focus on statistical man as a representative of the biological-psychological process, we shall have no hope of making predictions for individuals, but the problem will be easier to handle. We can still retain the important properties of individual variation by specifying the distributional parameters that describe classes of humans, and we can thus hope to develop a theory of sociological influences that will generate useful statistical predictions. In the ensuing discussion, we will cite various sociological "theories" that seem potentially relevant to aggression. In brief, each of these "theories"—for instance, those of Marx, Durkheim, Merton, Cohen, Coser, and Cloward and Ohlin—offers a limited set of qualitative propositions relating selected social systems variables to the behaviors of "average man" and not "statistical man," since distribution properties are not represented. Generally, the distinction between different views is essentially that of emphasis on selected sociological variables to the exclusion of others. No general theory with differentially weighted representations of all major relevant sociological variables exists.

Generally speaking, we accept as a *theory* a body of propositions stating relations between the relevant variables, where the statements are predictive (or post-dictive) of classes of phenomena. The statements may be qualitative in the sense that they refer to nominal classification of events, although more refined measurement would be preferable (Stevens, 1951). In

general, the most useful theories contain precise measurements of events (that is, are highly quantified) and therefore have a restricted range of application and relatively narrow ranges of prediction. We tend to use the term *model* in many such cases, and the term *theory* for a body of propositions with a broad range of application. Except for such value judgments concerning when to use which term, we view *model* and *theory* in the same general sense, preferring *model* to refer to a more precise theoretical statement. We should therefore work toward refining qualitative theories into more quantitative models without seriously restricting their ranges of application. With this motivation we will comment later on selected mathematical models in sociology and speculate on their transformation into models of aggression.

By *aggression* we mean behavior that violates the personal rights of others, with an emphasis on physical violence or the threat thereof. Questions such as the motivation of the aggressor or the social function of the action may require consideration in an attempt to formulate a more generally satisfactory definition.

Violation of rights implies questions of legitimacy, and we then face the task of identifying the judge. We temporarily appeal to our own value system and refrain from further refinement of our preferred definition in this brief treatment. Perhaps we can exemplify our view by claiming that two boxers beating each other while obeying the rules of the sport are violent but not necessarily aggressive, and this may also be considered true of a public executioner enacting his social role. However, since we abhor the socially approved dutiful functions of Nazi concentration camp officials as violently aggressive, it is clear that our values would appeal to a more global notion (of legitimacy) than that of the norms of any functioning social system.

We can refine our definition of *aggression* by distinguishing between "instrumental aggression"—intentional action where the primary aim is to achieve some goal but where injury to others is an important accompaniment—and "hostile aggression"—action controlled primarily by anticipations of that action's injurious outcomes (Feshbach, 1964). Perhaps a finer distinction would include "impulsive aggression," where the actor is in part responding involuntarily to certain environmental features (Berkowitz, 1974). These definitions of aggression or violence imply an undesirable social phenomenon. Others, however (for example, Collins, 1975; Sorel, 1950), use the term

*violence* to refer to an essential ingredient of the social system. Collins, for example, refers to the state as the "organization of violence." We agree with the theme expounded by Chandler (1973) and would argue that sociologists must seriously undertake the task of classifying the phenomena called "violent" or "aggressive" in society. Chandler begins his response to this classification problem by defining violence residually as "any non-legitimized application of force." He then deals with "legitimacy" as a property of participants' perceptions and evaluations of an event. Finally, he lists some sociologically important features of forceful or "violent" activity, along with some hypotheses concerning their implications for legitimation. These features include acts of omission versus acts of commission, direct versus indirect acts, random versus patterned actions; actions with tangible outcomes versus those with symbolic outcomes, and instrumental versus expressive actions.

Of interest to us at the moment is the question of the process of legitimation, which serves to define an act as violent or nonviolent. This legitimation process resides in some set of judgmental responses of the relevant parties to the potentially violent action. In this simplest case, the three views are those of the purveyor or initiator of the force, the victim or recipient of the action, and the audience. Any of these parties may be an individual or a group, although generally the audience probably will be a culture or an institution. With this social triad we must then consider an analysis of coalition patterns to resolve the question of legitimacy of any potentially violent act. The basis of any legitimacy judgment itself may be multidimensional, including notions of sympathy, justice, and public law; the behavior and characteristics of the victim; the behavior and characteristics of the attacker; or utilitarian factors (Chandler, 1973; Lincoln, 1973). This judgmental process also may be thought about in terms of social evaluation concepts, such as those of distributive justice (Homans, 1961), equity and inequity (Adams, 1965), or relative deprivation (Stouffer and others, 1949). We thus see that this definition of violent aggression as the illegitimate application of force leads to a social-cognitive structural analysis, at least at the level of a triad. Furthermore, each judgmental component (of the triad) may be the result of the interaction of several cognitive forces.

Now we wish to speculate. The concepts we have referred to have no predictive power to speak of; therefore, as theoretical works they may be considered only ground breakers. Cogni-

tive balance theory in the abstract has been formally developed (Heider, 1958) and might provide a base for future work in the modeling of sociologically determined personal views of injustice and violent aggression. Quite briefly, the structure of balance theory is as follows (Fararo, 1973). Basic notions are "entities" (persons or nonpersons), "unit formation" (an operation performed by a person upon any two entities so as to construct a third), and "sentiment" (a signed relation of a person to an entity). The theory views all units and sentiments as the outcomes of operations and feelings of any selected person. Subsets of entities, subsets of relations, and a commutative binary operation are identified in three basic axioms. The basic definition is that of balance, which is said to exist for a Heider triad (the selected person,  $p$ , and any other two entities,  $x$  and  $y$ ) if and only if the sentiments relating  $p$  to  $x$  and  $y$  are of the same sign. Basic principles are the following: (1) A balanced state is an equilibrium state. (2) If a triad is not balanced, then pressures toward a balanced state arise. (3) If a triad is not balanced and if no change is possible under the given conditions, then tension arises. Further formalization of balance theory derives from the use of graphs and the cycle condition (Cartwright and Harary, 1956) and the definition of balance as a quantitative concept. Triads may be embedded in larger systems, which could represent a more complex social structure. A time-varying triad may be studied in the context of a dynamic Markov process representation, and its state may be shifted by disturbances from the larger system considered as inputs to the triad (Fararo, 1973). We know of no attempts to use abstract balance theoretical models in formalizing thinking about the sociological processes concerning aggression. Principles and assumptions might require restructuring for such purposes. For example, the social evaluation hypotheses might be formalized by identifying the potential aggressor as the focal element of a triad, the potential victim as the second element, and an event perceived as an injustice as the third element. A theoretical principle that may need to be introduced is that the threshold of violence is approached when the sentiment relationships are both negative (a particular state of balance). Considerations of disturbances from the larger system might then suggest when an eruptive or violent state may be expected.

We drifted into the notion of relative deprivation while highlighting the subjective cognitive processes involved in the classification and generation of violence. Many problems of



underspecification, such as the arbitrariness of selection of reference groups against which to evaluate deprivation and injustice, limit such concepts. For example, in cases of racial tension the reference group used by a minority could be the group that defines the prevailing social order or, alternatively, the minority group itself at an earlier point in its history. The likelihood of aggressive or violent reactions is bound to be different for the two alternatives. Progress in formal theorizing thus has not advanced much beyond the "economic determinism" of Marx, where social deviance is viewed as a response to poverty and where poverty characterizes those economically exploited by the private owners of property and the means of production (Marx and Engels, 1849). Another view is that criminals and other social deviants are natural elements in any social system, since the system provides a facilitating environment for their existence (Tannenbaum, 1938). Capitalism may breed social irresponsibility and lead to crime by providing the "climate of motivation" (Bonger, 1916). Durkheim made sociological waves by viewing crime as both normal and functional in society. He pointed to individual deviation from the collective and noted that some deviants will necessarily have undesirable characteristics (including a proneness to criminal action or violent aggression) as defined by the collectivity. In his view (Durkheim, 1894), social deviations are functional and even necessary for social change. He also emphasized the concept of "anomie" or "normlessness" as a system state replacing "solidarity" and providing the setting for the growth of antisocial behavior.

Merton (1968) further advanced the concept of anomie with greater specificity, and his work may provide a reasonable characterization of modern "theories" in sociology most directly related to our topic. Merton defines five modes of adaptation which are more or less available to any individual in response to the pressure exerted by "social structures." The pressure is the result of the goals established by society as desirable, valuable, and "worth striving" for and the means, tools, or procedures that society recognizes as legitimate for obtaining those goals. In American society, for instance, boundless accumulation of wealth appears to be the major goal, and a variety of means are sociologically recognized as legitimate. The modes of adaptation described by Merton are conformity, innovation, ritualism, retreatism, and rebellion. Conformity represents acceptance of both socially sanctioned goals and means and is presumably the commonest mode of adaptation. Innovation means acceptance

of the culture's recognized goals but rejection of its approved means, followed by the use of other (illegitimate) means. Ritualism refers to rejection of goals coupled with the acceptance of means. Retreatism involves the rejection of both goals and means. Rebellion is the rejection of both goals and means of the prevailing culture and the substitution of other goals and means in their place. Violent aggression is linked to three of these modes of adaptation: innovation, retreatism, and rebellion. Violence in the form of armed robbery, mugging, and similar acts is only one of many social innovative response patterns aimed toward achieving culturally approved goals. Violent aggression may accompany the retreatism mode in such cases as when addicts must be aggressive to obtain the money to support their habits. Because it represents an attempt to alter the social system or create a new one, rebellion may lead to violence as a revolutionary social movement. Thus, rebellion is more likely to lead to intergroup violence, while the violence derived from innovation or retreatism is interpersonal. Merton's conceptualization is tied to a socioeconomic status analysis in that the success goals of American culture permeate the social strata while the socially approved means are relatively restricted to the upper levels. Thus, violent as well as nonviolent crime is more common among the socially disadvantaged, such as minority groups or the working class, because they experience greater social pressure due to limitations of availability of means. This view clearly serves to help explain only utilitarian delinquency. Many delinquent and criminal acts of violence are admittedly not innovative procedures designed to reach goals defined by the global system. The choice of adaptation pattern resides in the individual and the influences of the relevant subculture, and Merton has not provided a further specific classification to illuminate the variables influencing such choice.

We note here Thrasher's (1963) classic study of the gangs of Chicago, which was a base for further work on subculture. The subculture's influence is emphasized by Cloward and Ohlin (1960), who describe three classes of subcultures under their concept of differential opportunity. They unite "anomie" (Merton, 1968) and "differential association" (Sutherland, 1947) in their treatment of responses as a function of the relative availability of legitimate and illegitimate opportunity structures. The youth for whom legitimate means are not readily available will effectively seek illegitimate means. The "soft determinism" of Matza (1964) is suggestive terminology here, where the delin-

quent "drifts" into his basic role by flirting randomly with conventional and deviant behavior patterns. Cloward and Ohlin see illegitimate means to acceptable cultural goals represented in the opportunities of the "criminal subculture." Neighborhoods in which such a subculture is dominant usually have a well-organized subsystem of norms and values supporting criminal and violent activities. The violence, however, is controlled. It is "instrumental violence." Organized crime is business, and violent aggression is a tool of the trade. A subculture that does not provide opportunities for either conventional or criminal lifestyles is a "conflict subculture." Here "expressive violence" flourishes as a goal in itself, and also as a response to frustration and an expression of status striving. It is a place where respect in the gang may be a function of one's reputation as a street fighter. A special "retreatism subculture" is identified for those "double failures" who cannot make it in either the criminal subculture as successful crooks or in the conflict subculture as honorable toughs. They become alcoholics, drug addicts, psychotics, and assorted bums.

According to Wolfgang and Ferracuti (1967), the use of violence in a wide array of situations reflects the basic values of a "violence subculture," which generates guidelines and moral support for the use of aggression and violence in daily routine and as a means to solutions of a variety of problems in living. Subcultures of violence are suggested by the high rates of violence among young males who are black and/or of the working class, as reported by the National Commission on the Causes and Prevention of Violence (Graham and Gurr, 1969). Supportive of this view is the fact that interpersonal violence occurs most frequently between intimates, or among persons of the same race and/or social class, and is often "impulsive." Thus, the actors in the play appear to share a common cognitive structure that implies the use of force as a proper response pattern. They have been trained in the same school of violence. Various attitude surveys (Blumenthal and others, 1972; Miller, 1958) tend to support social class differences in the approval of violence. But note that attitudes as reflected by such surveys are only presumptively reflective of the corresponding behavior patterns. Social-psychological characteristics of the violence subculture were proposed by Stykes and Matza (1957) in the form of "techniques of neutralization" which delinquents may use to rationalize and prevent guilt feelings for their aggressive behavior and thus remain at least partially committed to the conform-

ity norms of the dominant social order. These "apologetic failures" could not measure up to the "middle-class measuring rod" of A. K. Cohen (1955). Cohen argues that lower-class boys develop a subculture in response to the adjustment problems and low self-esteem caused by their acceptance of middle-class standards of status and success, on the one hand, and, on the other hand, their inability to adopt middle-class values as a means to achieve those goals. In his view, the activities of this subculture are nonutilitarian, malicious, negativistic, versatile, and characterized by short-run hedonism and group autonomy. Kitsuse and Dietrick (1970), however, argue that it is just as reasonable to assume that the lower-class boy rejects middle-class standards as it is to assume that he accepts them. They also point out that Cohen's description of the activities of the lower-class subculture may not fit the facts for lower-class gangs but may, instead, characterize some middle-class gang activities.

Miller (1958) suggests that lower-class values derive from six characteristics (or "focal concerns") inherent in the lower class itself: trouble, toughness, smartness, excitement, fate, and autonomy. These characteristics, in his view, distinguish a lower-class cultural system from those of the middle and upper classes. Miller also emphasizes the relevance of family structure—for instance, in the "female-based household" of the lower class. In such units the adult male, even when present, plays a lesser role in the rearing of children and in the economic support of the family as compared to his counterpart in the upper classes.

In tune with the concept of subcultures of violence is the work of Faulkner (1973) on the ethnography of violence in certain occupational systems (particularly professional hockey). Faulkner shows how the individual members perceive, define, and classify experience; how they act under conditions of probable danger and assault; and how they interpret violent acts as a means for testing self and others in the context of their professional culture. He follows a symbolic interactionist analysis in which violence plays a basic communication function in identifying social roles for the self and others. It is suggestive of a system where violence is central but where the targets of violent behavior accept that role as just, under the implicit rules of the sport. Such a system probably should be distinguished from a system where the violence is viewed as unjust by the recipient (referring again to a possible distinction between violence and aggression).

Erlanger and Winsborough (1976) use a simultaneous equation model in an attempt to formalize the subculture of violence thesis as a social systems feedback process. Specifically, in an attempt to interrelate a man's fistfighting with other men and his perceived respect by others, they introduce two linear equations: one to represent respect as a function of fighting (presumably earlier in time) and the other to represent fighting as a function of (presumably prior) respect. This work, which is still in its early stages, is an example of relevant mathematical modeling.

Finally, Cohen and Short (1958) describe characteristics of a parent-male subculture, a conflict-oriented subculture, a drug addict subculture, a semiprofessional theft subculture, and a middle-class delinquent subculture. A fully satisfactory theory of delinquent subcultures, in their view, must specify the adjustment problems spawning each such subculture and clarify the social structure's roles in generating those adjustment problems and determining the nature of the corresponding solutions.

What do all these works really offer in the way of theory? To us, they seem to be valuable because they label potentially relevant variables—although, in general, they do not define these variables carefully enough to make them useful in a formal predictive theory. The works cited state overgeneralized propositions that relate poorly defined concepts to each other in a loosely qualitative way (for example, more of  $x$  leads to more of  $y$ ). Inadequate definitions are coupled with a lack of any specification of measurement for the major variables. This procedure yields a confusing set of overgeneralizations, so that proponents of conflicting propositions can do continual battle in print. Yet rhetorical force is insufficient to resolve arguments where the empirical evidence is weak or lacking and where many of the focal concepts play a contributing role in the sociological process. Without an underlying theory of measurement for well-defined variables, the possibilities for developing a good formal theory are out of reach. Assuming that definitional and measurement problems could be solved for this field, we are positively stimulated by the formal structure of much of the theoretical work in mathematical sociology. It seems to us that much of the work we have discussed in preceding paragraphs could be nicely conceptualized in the structure of stochastic-state process models. To whet the appetite, imagine a complex social system such as a major American city. Suppose that—for such forces as values, cognitions, and beliefs—we can carefully

as individuals, groups, or nations; and the analysis aims to describe interpersonal, intergroup, or international conflicts, respectively. There are different types of conflicts—for instance, pragmatically based versus emotionally based conflicts (leading to instrumental versus hostile aggression) or conflicts controlled by virtue of institutionalization versus conflicts uncontrolled by the system housing them. Different classes of social systems may be prone to different types of conflict. In pursuing this conceptualization, Scherer, Abeles, and Fischer (1975) discuss the study of predictability of the time course of events for conflicts, which they refer to as “natural histories” of conflict. Interestingly enough, it is Marx’s theory of social evolution that they first abstract in their systems language.

Their “natural history” representation of conflict, which is similar to the work of Kriesberg (1973), can be summarized as follows. Initially, elements or parties in a system are either unrelated to a large degree or have a cooperative relationship. This is “precompetition.” “Competition” results when changes in the system yield a competitive relationship for the parties involved. The stimulants to change may be internal or external to the system. When the elements subsequently aggress toward each other, there is “conflict.” The intensification or “escalation” of competition and conflict is a “positive feedback process,” which generally leads to “polarization.” Here, depending on the interrelationships existing between elements of the system, elements in conflict will tend to group themselves in the form of conflict blocs, with many strong positive relationships between elements in each bloc. Positive relationships between elements in conflicting blocs will be likely to vanish and give way to negative relationships. A special (often brief) time period may be evidenced, a “crisis” period, when violence is most likely to occur. Finally, there is either a deescalation of conflict and a return to competition (or cooperation) or a major breakdown and restructuring of the system itself. This, then, is the stage of “resolution” or “revolution.” Whether violence will erupt in the course of resolution or revolution—and when and how—may depend on the parameters of the system. Thus, violence may prove less likely when the pattern of interrelationships among conflicting elements is highly complex. Or perhaps conflict intensifies as a function of increasing similarity of element-characteristics, such as strength. Or violence may become less likely as the number of simultaneously existing conflicts in a system increases (Mack and Snyder, 1957). Again, if a conflict

occurs within a set of specifications governing its course (that is, if the conflict is institutionalized), there may be inherent safeguards against violent action. Examples of real conflict situations to which this discussion may be applied are many. Some are discussed by Scherer and his colleagues (1975). A special example is political revolution, historically a particularly intense kind of violent conflict, viewed as unresolved conflict that escalates until the system is destroyed and reconstructed. We have reviewed this systems language outline of the process of conflict because it abstracts the problem in a way that could be a valuable precursor to a formal theory of violence and aggression.

Since we have strong aspirations for mathematical models, we will now briefly outline, as an example of such work, the Coleman methodology (Fararo, 1973) for the analysis of social influence in the format of the theory of continuous-time finite-state Markov chains. First, some individual process, which involves two possible states, is postulated. For example, one such state might represent a precursor to violent aggression, and the other might be its complement. Second, a number of individuals are embedded in a complete relational network involving links of uniform weight. The individuals may be individual people, as in Coleman's (1964) application to voting intentions of union members. However, they can also be groups or even subcultures. Note that a basic problem of mathematical tractability arises from applications to large networks where influence rates are not homogeneous and where the relational system is not complete. These rates might be interpreted as reflections of how, through verbal and nonverbal exchange, interpersonal influences affect perceptions of injustice and legitimacy. The third postulate is to modify the individual processes so as to include network-induced transition behavior. Here the link weights become additions to the transition rates. The fourth step is to define the state of the network as the number of individuals in each state and then to derive a state transition rate for the network. Subsequent analysis involves determining the temporal course of the network process, finding the equilibrium of the probabilistic system at the network level, and checking equilibrium stability by taking appropriate limits. To apply the model, one must first identify a collection of networks of common size and then obtain the proportions of these networks in the different network states, estimate parameters, and check for goodness-of-fit of the predicted distributions with the data. Coleman's application to two states of voting intention for typographical union shops

fared well in its test. An intelligible treatment of Coleman's model in appropriate mathematical terminology is given by Fararo (1973). Note that Coleman's methodology extends to a distinction between "state" and "response"—so that, for example, voting intention need not be identified with voting behavior, and therefore similarly for aggression. The Coleman term for this extension is "response uncertainty," which is essentially a state-space approach, with a distinction between state and observable behavior.

Conflict is a precursor of violent aggression, and work toward a theory of "conflict sociology" is exemplified by Collins (1975). No mathematics is involved, but Collins abstracts what he sees as the main causal statements of conflict phenomena and lists them intermittently in his text. We view his attempt to explicate definite propositions of potential theoretical worth as a major first step in sociological theorizing. Collins' basic conceptualization of social stratification descends from the works of Weber and Marx. The focus is on dominance relations in all subviews of the social system structure, including occupational, domestic, and general relational networks; and the purpose is to reveal organizational principles governing the formation of people's cognitions and behaviors. The roles of ritualization of belief and behavior are seen as intimately involved with the stratification process. Collins also relates animal ethology and social phenomena in extracting the features that shape social relations. In his view, conversational interaction is the major social activity serving to form the structure of all social networks. He also examines the history of ritualized social encounters and stratification within the family structure in terms of sex- and age-based dominance struggles. He then attempts a formalization of theory of organizations in conflict; in this context, he refers to the political state as the "organization of violence." Two of his explicit propositions are (1) "The more the individual soldiers of a conquering army are allowed to collect booty and leave for home or new conquests, the less of a permanent and centrally controlled government will be established" (Proposition 20.41) and (2) "The more an army is supported by quartering troops in permanent garrisons supported by local tribute, the more likely the territorial regime is to be moderately centralized, with political control the subject of struggle between garrison commanders and the central government" (Proposition 20.44). We are enthusiastic about the potential of this sociological base for conflict theory, coupled with work by



others on formal mathematical models of the core processes exemplified by Collins. For example, mathematical models of "images of stratification," "dominance structures," "social mobility," "kinship," and the general theory of "games" are in existence (Fararo, 1973). Surely we may hope for a coupling of the work of sociological sociologists and mathematical sociologists to yield a decent sociological theory of aggression and violence (built on the conflict process). We believe that the case for embedding our sociological problem into useful formal mathematical theory is "in theory" a reasonable possibility.

# Ethological Theories of Aggression

*Richard H. Schuster*



Why aggression? Behavioral theorists with a biological orientation seek an answer in the evolution of behavior. If aggression is prevalent in a species, it is likely to have a positive function in the life of that species—or, at least, it had a positive function in the recent past. Evolution will also mold the level of aggressiveness and the forms of the behaviors, so that aggression will tend to be maximally useful to the species.

This chapter was prepared while the author was a research fellow under a grant from the government of Israel, Ministry of Absorption. The research on the lechwe antelope in Zambia was supported by the Fauna Preservation Society of the Zoological Society of London and the Kafue Basin Research Project of the University of Zambia. Thanks are also due to the National Parks and Wildlife Service of the Ministry of Lands, Natural Resources, and Tourism for permission to work in Lochinvar National Park.

The biology of aggression is often associated with ethology, a branch of behavioral biology concerned with the evolution and functions of species-specific behavior, especially instincts. Foremost among ethologists is Konrad Lorenz, whose 1963 monograph *On Aggression* (first appearing in English in 1966) applied the ethological approach to aggression. Other ethologists have followed Lorenz's lead in the area of aggression (Eibl-Eibesfeldt, 1970; Ewer, 1968).

Lorenz's thesis provoked widespread scientific and popular commentary because his conclusions, drawn primarily from animal research, were extended to human behavior. By suggesting that terrorism, nuclear warfare, and urban violence have as much of a biological basis as the territorial fights of cats, Lorenz offered a startling conclusion about the inheritance and inevitability of human aggression. Together with other popular books of the same decade, especially Desmond Morris's *The Naked Ape* (1967) and Robert Ardrey's *The Territorial Imperative* (1967), Lorenz aimed to counter the centuries-old belief that man alone has evolved to the point where he possesses neither significant instincts nor biologically determined tendencies to behave in any way unique to the human species.

Judging by some recent criticism of Lorenz (for example, Montagu, 1973), a biological approach to aggression remains caught up in the ancient debate about whether a behavior is the product of *instinct* or *learning*. In other areas, psychologists agree that a variety of learning abilities in both animals and man have been shaped by evolution (Hinde and Stevenson-Hinde, 1973; Seligman and Hager, 1972; Tinbergen, 1951). Such findings have contributed to a climate in which a simple dichotomy between "nature" and "nurture" is giving way to complex interactions during development between genetic and environmental conditions. Meanwhile, ethologists persist in their particular biological approach, linking animal and human aggression in a general model of instinct; and critics, many within anthropology, cling to their idea that culture remains the only significant force shaping human behavior (Montagu, 1973).

This chapter will sidestep the pitfalls of the nature-nurture debate. Its goals are to present the ethologists' approach to aggression as part of a more general introduction to the biology of aggression. In a book devoted to human aggression, the chapter will emphasize that many animals fight and kill because it is as adaptive for the species as eating and courtship. (To ask whether the same was true when man was evolving, and remains

true today, is to engage in biological theorizing about origins and functional significance; in such theorizing, moral attitudes and emotions toward warfare, pain, and death are irrelevant.) Lorenz's instinct theory of aggression is outlined and then evaluated as a unifying theory of animal aggression. In this discussion, some of my own field research on a particularly aggressive species of antelope is offered as an illustration of how the perspective of social biology complements the ethologists' emphasis on species-specific behaviors. The chapter concludes with an outline and discussion of Lorenz's more speculative theory of human aggression.

### Lorenz's Ethological Approach to Aggression

Aggression is one way that animals compete. At the root of natural selection is competition among members of a species, leading to the selection of fit individuals and transmission of their genes to the next generation. When needed resources—food, water, a place to hide or sleep or give birth—are scarce, individuals who gain more access also gain a survival advantage. When the scarce resource is a mating partner, competition directly determines the gene pool of the next generation. The competition can be indirect, a race to have first access, in which case the term *aggression* is not usually used. *Aggression is a direct form of competition where individuals confront each other in threatening or fighting behavior and where one of the contestants tries to prevail over others.* When the winner gains preferential access to resources or mates, aggression is adaptive.

The cornerstone of ethological theory is that aggression evolves as an instinct. When so labeled, a behavior is usually said to be unlearned, resistant to modification, and similar in all members of a species (species-specific). The ethological model of instinct is furthermore a general theory of behavior, incorporating unlearned behaviors that evolve with their own motivation and stimulus control (Lorenz, 1950; Tinbergen, 1951). Applied to aggression, the theory can be reduced to four propositions.

*Proposition 1: Aggression is adaptive in population dispersion, sexual rivalry, and social organization.* Lorenz traces the evolution of aggression to these three very general species-preserving functions. The most important is to disperse a population over its habitat, so that local resources are not exhausted. The value of this aggression is greater when resources are scarce

or unevenly distributed or when the local population is large. Male rivalry over females is important as a means of selecting "fit" males for breeding. Aggressiveness evolves as one of a set of secondary sexual characteristics that evolve in the competing sex, all products of what Darwin (1871) called "sexual selection." This is the basis of most cases of sexual dimorphism, differing appearance of male and female. Males are typically larger and stronger and are equipped with weapons and decorations for the intrasexual competition over females. The adaptiveness of male aggressiveness can also follow from other male roles, such as protecting his female and offspring or defending scarce resources for them. The third benefit of aggression is to create a stable hierarchical social order of leaders and followers. Such an order is useful in large and intimate social groups, providing leaders for protection, decision making, breeding, and other important purposes.

*Proposition 2: Aggressive behaviors are instinctive coordinations of threatening or fighting that have become ritualized to minimize injury and death.* In ethological theory all inherited responses are not entire functional chains, such as "having a fight," but simple, invariant movement sequences called *fixed action patterns* (FAPs). Pecking and scratching are examples. The same FAP can serve different functions, depending on the type of motivation that drives it. The same peck, for example, can appear when a bird is feeding or fighting. Most aggressive FAPs have been shaped by a special evolutionary process known as *ritualization*. Whenever it benefits an animal to communicate, natural selection shapes behaviors into "displays" of stylized and conspicuous movements specialized for signaling in social situations. Movements are simplified, stereotyped, and exaggerated in amplitude, repetitiveness, and slowness. Anatomical parts used in the behaviors can themselves become conspicuous in size, color, or any other attention-getting feature. In males, ritualized aggression is one of the main products of intrasexual selection. Ritualization preserves the adaptiveness of aggression by producing a winner without harming either winner or loser. The winner is determined without injury, exhaustion, or death. The loser, who might carry the genes of the winner, is also spared to compete again. The evolutionary trend toward nonviolence is seen in both fighting and threatening.

If actual fighting evolves, it has been ritualized into a harmless contest in which movements do not aim to injure and weapons, if potentially harmful, are used harmlessly (Ewer,

1968; Matthews, 1964). The fighting styles of many animals are species-specific behaviors that evolved with the size and shape of the animals' weapons (Geist, 1966). The combat of antelope is classic. In many species, horns are ringed, so that they can be interlocked without slipping. The tips are curved, so that, when interlocked, they do not point toward vulnerable flesh. The actual fight is a pushing match, a tug-of-war in reverse, in which each contestant pushes hard against his opponent until one turns and flees. If one contestant stumbles during the fight, the other pauses until the first regains his feet, at which time the horns are carefully intertwined again. Apart from broken horns and occasional limps, injuries are never seen. Sheep and goats have heavy horns and other adaptations for their "clash" style of combat, in which males repeatedly charge and bang their horns together. Since the size of a sheep's horns can influence his success, the appearance of a male's horns can determine his social rank (Geist, 1966). Among antelope, horn size does not determine the outcome of fights, which depend more on endurance. Successful breeders are not necessarily those with the longest horns, and males with broken horns can compete successfully.

Ritualized threats are also species-specific. It is rare for an animal to respond to the aggressive signals used by another species in intraspecific competition. Threats may precede a fight or substitute entirely for it. In both cases, the threat is a non-contact substitute for actual fighting. Four classes of responses have proved particularly susceptible for ritualization into aggressive displays: (1) displacement responses—seemingly irrelevant FAPs which often occur when an animal appears to be in conflict between attack and escape and engages instead in eating or grooming; (2) intention movements—those that initiate and precede the actual contact; (3) redirected movements—aggressive FAPs directed at a target other than the opponent; and (4) physiological concomitants of aggression, such as piloerection or color changes (Brown, 1975; Eibl-Eibesfeldt, 1970).

*Proposition 3: Aggressive acts are caused by the buildup of aggressive motivation, which can be satisfied only by aggressive behavior.* This is the ethologists' general model of self-motivated instincts (Lorenz, 1950) applied to the problem of aggressive causation. Animals are said to possess a need to emit all their FAPs, so that the performance of each is literally an end in itself. The motivation is sometimes described as *action-specific energy*, from a well-known hydraulic model of energy accumu-

lation (Lorenz, 1950). The primary cause of an aggressive act is the buildup of aggressive motivation. Aggression is therefore described as *spontaneous*, varying in its likelihood with unobservable internal changes. It is also *rhythmic*, as motivation builds up, is discharged in an aggressive act, and builds up again. Most important, aggression is *inevitable*. It cannot be blocked. Removing an animal from its normal environment, even placing it in complete isolation, will not slow the accumulation of motivation. There will be an increasing readiness to attack a less appropriate target until the FAP will burst forth in a so-called *vacuum reaction*. The progressive lowering of threshold is accompanied by increasing restlessness and searching for a target, the latter known as *appetitive behavior*. This ends in eventual performance of the FAP, the *consummatory response*. The dual characteristics of spontaneity and inevitability are the features of aggression that underlie Lorenz's dire predictions about the human species. Even if aggression has ceased to be adaptive, its occurrence cannot be forestalled.

The emphasis on internally driven FAPs downgrades the importance of stimulus control in causing an aggressive act. Since aggression will occur anyway, due to its own motivation, the role of an aggressive opponent is to *release* the FAP sooner than it would have spontaneously erupted. Eliciting stimuli are often called *releasers*, and somewhere inside the animal is supposed to exist an *innate releasing mechanism* (IRM) to detect the releaser and uncork the FAP. Releasers have an important function in guaranteeing that the FAP will occur to the correct species and at the most opportune time and place. To this end, releasing stimuli typically evolve to be simple, conspicuous elements that evolve with the FAP to secure its functional release. The term *sign stimulus* is meant to signify that the actual releaser is often but a few elements, sometimes only one, in a total situation where the FAP is to occur. In a famous example from Tinbergen (1951), the territorial aggression of the male stickleback fish is not to another male's presence or behavior but to his reddened belly. The change to red occurs only when a male occupies a territory.

*Proposition 4: Appeasement rituals evolve to inhibit aggression.* In addition to ritualization of aggressive acts, harmless aggression is guaranteed in most animals by the evolution of rituals that inhibit aggression, so-called *appeasement* displays. These are used by one contestant to reduce the likelihood of aggression in another. Appeasement can occur before a fight, to

produce a winner without combat, or during a fight, to inhibit further attacks. Appeasement rituals also function between mothers and young and between males and females to ensure that aggression is permanently blunted in situations where cohabitation is beneficial in otherwise competitive species. Many appeasement rituals obey Darwin's "principle of antithesis"; that is, they evolve to be the opposite of whatever threatening or fighting postures a species uses. Aggression is presumably lowered when its releasers are removed. In "head flagging," a common appeasement ritual in birds and antelope, heads are turned sharply to one side during a face-off in which a head-forward position is threatening. Another category of appeasement ritual mimics the vocalizations and behaviors of non-aggressive members of the species, usually young and female, evoking reactions in the aggressor incompatible with aggression.

Lorenz notes that effective appeasement evolved in species that live intimately in social groups. A special case is the male-female relationship, in which cohabiting for a period of time has evolved for the purpose of reproduction. About 90 percent of bird species are monogamous, because cooperation in incubating and rearing is a great advantage (Lack, 1968). Lorenz believes that a relationship is made possible in highly aggressive species by the formation of a special affectional *bond*. This bond ensures the complete suppression of aggression between the mated pair but allows aggression to continue unabated against others. The formation of the bond is supposed to depend upon special rituals, in which aggression against the mate is redirected toward another—thus channeling the aggression in a more useful direction while cementing the conjugal relationship. Lorenz cites the "inciting" ritual in certain duck species and its further elaboration into the "triumph" ceremony of geese.

Social carnivores—such as lion, hyena, African hunting dog, and wolf—pose a different social problem. As hunters and killers of large prey, they possess lethal weapons. At the same time, these species have evolved to live in the intimate social organization of pride, clan, or pack, diverse systems sharing the advantages of cooperative hunting as their primary function (Kruuk, 1972; Mech, 1970; Schaller, 1972). Lorenz believes that these animals are models of peaceful coexistence precisely because of their killing potential. Social hunters supposedly have the most reliable ritual appeasement ceremonies for inhibiting aggression intraspecifically. In general, ritualized aggres-



sion, motivation, and appeasement are supposed to evolve as components of a balanced system to preserve the adaptiveness of aggression while minimizing harmful consequences for a species.

### Criticisms of Ethological Theories of Animal Aggression

If the ethological approach to aggression is to succeed, it must first explain animal aggression. Ethological theories arose almost entirely from animal research, much of it on phylogenetically much older orders than our own Primate. Extensions to human behavior were a brave attempt to derive more complex phenomena from a few simple propositions based on much simpler behaviors in animals. To avoid the unbalanced criticism that results when Lorenz's theory is evaluated solely as a theory of human aggression, we will confine our discussion to animal aggression.

*Is aggression adaptive?* Although ethologists stress the adaptive significance of aggression, they oversimplify animal aggression as ritualized peacefulness. Rituals are explained as a convergent evolutionary solution to the problem of minimizing injury and death when animals compete for food and mates. Animal aggression, however, is a collection of varied kinds of behaviors arising under many ecological pressures. Apart from suggesting that some animal societies are intrinsically peaceful while others are held in check by strong inhibitions, ethologists have largely ignored quantitative differences in the frequency of aggression and qualitative differences in the degrees of ritualization, fighting, and killing. They do not explain why social species as different as gorilla (Schaller, 1963) and herring (Lorenz, 1966) are peaceful while others, such as many cichlid fish, are very aggressive. Nor is it obvious why intraspecific killing is recognized as a normal occurrence in several highly successful species (Wilson, 1975), including the allegedly peaceful lion (Schaller, 1972). The issue is far from trivial, since Lorenz stresses the prevalence of human violence and murder as evidence for a unique case of nonadaptiveness. The recognition of adaptive violence and the great variation in aggressiveness among animals can counter the assumption that human aggression is necessarily a sign of a defect in society (Montagu, 1973).

Much of the diversity in aggressiveness among animal species can be traced to the social structure of animal life. Eisenberg (1966), Hinde (1974), and Wilson (1975) have surveyed

the many ways in which animals live in groups and the biological significance of this diversity. Space prohibits a summary of the great variety of animal social organizations. The main point is that there are many interacting ecological determinants of social organization, including the type and distribution of resources, population size and density, predation, seasonal variation in any of these, the requirements of caring for young, and even the size of the animal. These factors determine whether the animals will live together or disperse, cooperate or compete, be monogamous or polygamous, and even whether they will mate, have a leader, or defend resources. Lorenz recognizes the adaptiveness of aggression in organizing a social system such as territoriality but does not stress the adaptiveness of the social system itself. In his view, territoriality is one way that aggression achieves dispersion. But territoriality is a highly organized social system in which individuals or groups live in territorial networks with shared boundaries and conspicuous rituals for advertising and defending their exclusive areas. It is proving impossible to reduce the multiple forms of territoriality to a single type of organization. Hinde (1956) reduced the number to four in birds; Wilson (1975) thinks there are five among all animals, with many varieties of each. The type of territorial organization depends on its function(s) for the species, what is being defended, and whether by an individual or a group. Aggression is one category of behaviors that is adaptive in individuals because of the requirements of a particular social system, which is itself adaptive for those individuals. The diversity and evolutionary significance of aggression become aspects of diverse kinds of social organization. And so does the occurrence of frequent aggression, violence, and murder as adaptive features of some kinds of social systems.

A comparison between two types of territorial systems in African antelope will illustrate the relationship between social organization and aggression. In most respects, the social organizations of African grassland antelope are similar. They feed gregariously in small to large herds, probably because food is continuously distributed and herding is a useful antipredator strategy. In common with most mammals, postnatal care is primarily a female responsibility, so that male-female bonding is of little value. At the same time, selection of the fittest males for breeding benefits the species. Males therefore compete for females, and the result is polygamy. Sexual selection in the male sex has produced a high degree of sexual dimorphism, with

males possessing the behaviors and anatomy for aggressive competition. Male antelope are typically larger, with horns and sometimes additional coloration, and they are behaviorally aggressive and territorial. Despite all these similarities, two distinct types of territorial systems, associated with two very different levels of aggressiveness, are known. The determining variable is the resource protected.

When the resource is food, territories defended by individual males tend to be large, even in those species living in dense populations. The spacing between males can vary from about 100 yards to about 1 mile, depending on species and local conditions (Estes, 1969; Jarman, 1974). One consequence is that a number of males are excluded by competition from holding territories, their fate being to live in bachelor herds on the fringes of territorial areas. Territorial possession is also the basis of sexual selection. Bachelors are excluded from breeding, since breeding takes place only on a territory, where females can share in the defended resources while breeding with a fit male.

Frequencies of aggression have rarely been measured, since most research has concentrated on descriptions and phylogeny of rituals. Descriptions indicate that combined frequencies of all types of aggression are low and that fighting is a rare event. An exception may occur in the domain of the blue wildebeest (*Connochaetes taurinus*), where territories in one habitat are about 100 yards across and confrontations between neighboring males are a daily occurrence (Estes, 1969). In general, however, territorial behavior is probably best explained by the theory of "economic defendability," which is supposed to govern the natural selection of competitive social systems (Wilson, 1975). Feeding territories, for instance, should be adaptive only when more energy is obtained from the resources than is expended in defending them. Thus, territorial behavior in many ways functions to reduce the likelihood of aggression. Competition and aggression are confined mainly to the period when territories are being contested (Walther, 1972). Once the territories are occupied, owners can discourage would-be competitors by advertising their occupation with their conspicuous presence plus a variety of signals, mainly visual and olfactory. Other aggression-reducing factors include the large size of territories and what has come to be called the "dear-enemy" effect, that territorial neighbors live in a social network of known individuals.

When the protected resource is only a place to mate, territorial competition is directly for the chance to transmit genes

to as many offspring as possible. Here the theory of economic defendability does not operate. In two related antelope—the Uganda kob (*Kobus kob thomasi*) (Buechner, 1961, 1963) and the Kafue lechwe (*K. leche kafuensis*) (Schuster, 1976a, 1976b)—such territoriality occurs on a type of communal display ground known as a *lek* or *arena*. This is a traditional location, the same from year to year, where adult males occupy a cluster of small territories used exclusively for mating. Despite its complexity, the same organization is known to have evolved convergently in nine families of birds (Lack, 1968) and in a very few other species, including a bat and an insect (Wilson, 1975). Lek territoriality is worth describing in some detail because it is consistently associated with extreme sexual selection, including high levels of aggression and ritualization, and demonstrates much that is right and wrong with ethological theorizing.

The evolution of a lek system seems primarily the outcome of selection for two functions: for males, competition over who will do the mating; for females, ease of locating a place to mate. (Females probably have no other reason for being at this location, since feeding and parturition occur elsewhere.) A cluster of displaying males is detectable over some distance, especially when vocalizations are added. Leks are typically located on an elevated part of a flat plain, next to open water. The use of traditional sites is a further aid, especially in habitats where other locations have all the same advantages.

Competition on a lek is by means of territorial possession. In lechwe, individual leks can sometimes have more than 200 males, each occupying and defending an area as small as 10-15 yards across in the center and larger toward the outside. In other species, including the congeneric waterbuck (*K. defassa* and *K. ellipsiprymnus*), the entire lek area is about the size of one large territory. Territorial possession alone, however, does not guarantee mating success. Sexual selection is much more severe, since only one or two centrally located territories function as "mating centers." Only when a male occupies a mating center will he have the chance to mate with whatever females happen to be there at the time. Although the proportion breeding on any day is very small, the actual proportion of significant breeders over an entire season is somewhat higher. A male on a mating center becomes exhausted after a few days of virtually uninterrupted defense and courtship and is defeated by a challenger (Buechner, Leuthold, and Roth, in press). This turnover also makes occupation of any lek territory more beneficial than living in a bachelor herd.

Nearly all conditions known to increase aggressiveness are found on a lek. Sexual selection, in general, is most extreme in species that compete only for mating partners (Wilson, 1975). The males of lekking birds—including birds of paradise, manakins, grouse, and pheasants—combine decoration and aggressiveness to a high degree (Darwin, 1871; Lack, 1968; Wilson, 1975). The white-bearded manakin (*M. manacus trinitatis*) regularly attacks other species when defending a territory (Lill, 1974). Innate aggressiveness is complemented by lek conditions. Territories are small and clustered, combining frequent territorial interactions with a crowding effect. Because of turnover at the mating center and consequent reshuffling of some other positions, occupants do not hold fixed locations for long periods; thus, the dear-enemy effect is reduced. When females move through peripheral territories to reach the mating center, they are courted and chased by many males along the route, who penetrate adjacent territories. There is an overall centrifugal force exerted by the mating center, so that more central territories are smaller and yet the most coveted and contested. Sexual frustration could also be a factor, since all lek occupants are presumably in rutting condition. (In lechwe, the average testes weight is highest during the lekking season.) Hunger might also be present, since lek occupants, particularly near the center, are continuously displaying and rarely feed or drink.

The lek organization of the lechwe includes a number of unique features which probably contribute still further to their aggressive potential, making them possibly the most aggressive of territorial species (Schuster, 1976b). They are specialized floodplain feeders, inhabiting seasonally inundated grasslands of Central Africa, grazing in or near water, and migrating with the rise and fall of water level. Extremely high population densities are supported. In the Lochinvar National Park of Zambia, where the study was carried out between 1974 and 1977, about 35,000 lechwe lived in an area of about 200 square miles, about half of it comprising floodplain and adjacent grassland. The breeding season coincides with the rainy season, when water levels begin to rise, so that the lechwe must use a succession of lek locations as the herds move to higher ground. As a result all leks go through a cycle of expansion and contraction in size and number as the herds move through. Except for well-worn mating centers, individual territories are rarely demarcated by cropped grass, a stabilizing feature found in the year-round leks of Uganda kob. In a real sense, the lechwe leks are always in a state of organizing, when all territorial systems are most lively.

During the peak of the breeding season, an overall sense of tension and instability prevails, especially during periods of organization. A single unsettling influence, like a female running to or from the mating center, can spark off a period of complete breakdown, when fights and chases seem to be erupting everywhere. In other respects, lechwe aggression is a model example of the ethologists' rule that aggression evolves to minimize the chance of injury.

Injury and killing, however, seem to be normal and adaptive in a few species. Lorenz's impression of the bucolic life among social carnivores is not supported by detailed studies of lion (*Panthera leo*) (Schaller, 1972), spotted hyena (*Crocuta crocuta*) (Kruuk, 1972), and wolf (*Canis lupus*) (Mech, 1970). In these animals, a small group inhabits a territory within which it hunts and reproduces. Within the group, social interactions include many dominance and submissive behaviors to control aggression. But violence and death are features of territorial clashes between neighboring groups of hyenas and wolves and between male lions for possession of a female group and its territory. There is also a high rate of infant mortality among lions, since the adults sometimes kill the cubs or else the female abandons them or does not feed them. The effect is to keep down the population size and density, permitting individual prides to hunt over areas sometimes more than 100 square miles. This is also a feature of wolf society (Mech, 1970) and is believed to be necessary for large predators.

In general, the antelope and carnivore examples illustrate that the adaptiveness of aggression in animals, including species with frequent aggression or killing, can be understood as a feature of social organization for coping with particular environments. Lack (1969) and Marler (1976) have also emphasized that *all* competitive social systems, even the most aggression-free, can sentence losers to peripheral areas where isolation, poor food, predation, and a failure to breed can lead to a final solution as surely as violent death.

*Are aggressive behaviors instinctive?* Instinct implies unlearned and species-specific behavior. There is wide agreement that the fighting and threatening behaviors of animals are nearly always species-specific reactions to sign stimuli from conspecifics. Whether these features are reliable criteria of "instinct" is a separate question. It may no longer be worth asking, given the recognition that species-specific behaviors can develop from learning and other developmental interactions with environment

—interactions that are themselves shaped by evolution. Fighting styles and ritualized threats do not usually vary within a species except in rare instances, such as a recorded example of learning to use a “tool” in a chimpanzee society (Lawick-Goodall, 1971, pp. 109-111). A low-ranking male named Mike ascended to the dominant position following a chance encounter with discarded kerosene cans. Normally, a male chimp tries to intimidate others with a charging display that includes swinging and hurling rocks and branches. Mike discovered that noisy tin cans were far more effective, and he learned to use them with increasing frequency and effectiveness. It should be emphasized that the “new” response was the fortuitous use of a man-made object left around by the researchers. The threat-charge and the ability to use implements were already in any chimp’s repertoire. Mike’s learning was species-specific, the elaboration under quasi-artificial conditions of already existing behaviors unique to chimps.

The frequency of aggression varies widely within a species and is related to differing social organizations caused by local conditions. A dramatic illustration occurred in the experiments of Calhoun (1962) on rats and Leyhausen (1965) on cats. Artificial confinement and overcrowding produced a complex set of bizarre behavioral and physiological reactions, in which fighting and death reached alarming proportions. There seemed to have been a complete breakdown of social organization. Less dramatic but more important are the natural variations in social organization caused by population density and its determinants, including food distribution and predation. Sometimes the variation is quantitative, in group size or composition or in the sizes of territories (Crook, 1973; Jarman, 1974). Sometimes the type of organization itself is affected. A species at times may not exhibit stable territorial behavior if population is widely dispersed anyway or if it migrates, as in wildebeest (Estes, 1969). High density can cause some species to switch from a territorial to a dominance system (Wilson, 1975). In lechwe and kob antelope, the lek organization seems to require a high density of rutting males. Small kob populations do not lek, and Kafue lechwe do not lek except during the main breeding season, if only a few males are rutting (Schuster, 1976b). Another subspecies of lechwe, the red lechwe, lives in small, scattered populations that have not been seen to lek, even though its aggressive behaviors are qualitatively identical to those of other lechwe (Lent, 1969).

Variations in social organization can influence the likelihood of aggression. Perhaps the best working assumption was suggested by Wilson: Aggression occurs when it is profitable. If conditions of resource distribution or population size require competition in order to survive, then aggression will be more frequent. Many species among insects, birds, rodents, ungulates, and primates have been seen to be peaceful or aggressive depending on group size, population density, the distribution of food, and seasonal variations in resources (Hall, 1964; Wilson, 1975). The mediating factor is often social organization.

To explain diversity in intraspecific social organization and social behaviors such as aggression, Wilson has proposed that such species traits are not inherited with fixed features but can vary adaptively along a "behavioral scale." If an animal's social system can vary with population density or food distribution, then the *entire range* of variation may be considered as one complex, flexible adaptation acquired by natural selection. Aggression (for instance, on territories) ought to be most adaptive if it is rare when population is scattered and becomes increasingly frequent and intense when population is dense. Whether a flexible trait that is sensitive to ecology ought still to be called an instinct is less important than demonstrating that it is a species characteristic.

The possible existence of behavioral scales leaves unresolved the relation between an entire social system and the social behaviors of individuals living within that system. On the one hand, aggressive (and other social) behaviors used for cooperating and competing are highly species-specific, except in frequency and intensity; on the other hand, the overall social system shows greater flexibility. A partial solution to this paradox is that group structure is not free of genetic constraints (Kummer, 1971). The structure emerges from complex interactions among the social behaviors of individuals, the local population size, and environmental conditions. If the social behaviors of individual group members are highly fixed in form, there ought to be limitations on the range of possible group organizations; and, as Kummer demonstrated with baboons, animals of one species should find some problems when placed in a group of even a closely related species. There ought to be an intimate connection between group structure and individual behavioral traits because the attributes of a social system will be selected only if they benefit the individuals in the group. And individuals will be selected for behaviors that enable the group



to function smoothly. As Hinde (1974) has emphasized, the features of individual and group are parts of an adaptive complex, so that any one feature is linked to many others.

The antelope lek offers a simple illustration. Selection of males is for aggressiveness in an organization of small, clustered territories. To mate successfully, females must remain for sufficient time within the mating center. Mating interactions seem designed for this purpose. For example, master males, after chasing out an intruder, return to the mating center with head sharply lowered, a means of controlling aggression that could drive out the females; also, the sequence of courtship rituals leading to copulation is telescoped into a rapid sequence (Buechner and Schloeth, 1965). In other antelope, territory size never shrinks to anything approaching the 10-15 yards seen in lechwe, even when population size and density are comparable (Estes, 1969). There seems to be a minimum territory size in every species, a compelling instance that at least some features of social organization can be limited by natural selection. A related feature is that courtship rituals lack the antiaggressive features and are less compressed.

As the preceding discussion has indicated, ethologists are largely accurate in their description of aggressive behaviors as species-specific; but they have ignored large adaptive differences in the likelihood of aggression within a species due to local variations in social organization. Only in extreme cases of confinement or overcrowding does aggression become pathological, accompanied by the breakdown of social organization and other social pathologies.

*Is animal aggression ritualized?* Ethologists have emphasized that aggression has undergone a process of ritualization throughout the animal kingdom, primarily to reduce nonadaptive side effects of fighting. There is much support for the belief that aggression has often evolved to minimize injury by means of nonviolent fighting or threat. There are also important exceptions, especially among social insects (Wilson, 1975) and social carnivores.

Whether nonviolence is evidence of ritualization is a separate issue that has been taken for granted. Aggression could have become ritualized as one means of minimizing injury. But animal behaviorists have become cavalier about dichotomizing all aggressive behaviors into vicious fighting or ritual. Any confrontation is described as ritualized when physical contact is not observed, whether or not the threat has any of the exaggerated

features that Huxley observed when he coined the term *ritualized*. Ritual is also used to explain the origin of noninjurious styles of fighting, such as the combat of antelope (Lorenz, 1964; Matthews, 1964).

Strictly speaking, a ritualized response is specialized through evolution for communication. Ethologists prove ritualization of a response by tracing its phylogenetic relationship to a less showy and less stereotyped response, in the same or a related species, which might serve another purpose altogether. A ritualized threat might be derived from a feeding response. When the origins of a ritual are traced, its ceremonial features for signaling can be detected. The concept of ritual becomes abused, however, when a response with some of these features is explained as ritualized even though no ancestral behavior has been identified and no evidence of communication has been shown. An animal can exhibit ritual-like postures and movements when in a conflict between antagonistic behaviors or when in extreme fear, without sending any message to conspecifics. One can determine whether a possible display is communicative (and therefore ritualized) by calculating the degree to which the display of one animal alters the behavior in another (Brown, 1975). The duet-like behavior of many threat displays between competitors is evidence of a high degree of ritualization. Measurement would give meaning to claims that the behavior of animal X is "highly ritualized"; instead, such statements often are based on subjective impressions of beauty or ceremony. The requirement of communication would also remove many kinds of fighting from the category of ritual. The adjective *stylized* (Ewer, 1968) seems more appropriate for fighting that was shaped mostly by the advantages of noninjury rather than for communication.

The misleading use of ritual can be appreciated in the lek aggression of lechwe. Leks have long been famous for a high degree of both aggression and ritualization (Lack, 1968), ever since Darwin (1871) relied heavily on lek ritualization to support his theory of sexual selection among competing males. In lechwe, the relationship between aggression and ritualization is more complex than any simple dichotomy between fighting and ritual. There is also no obvious trend toward ritualization if quantitative measures are taken.

If the total repertoire of lechwe threat behaviors is counted, the number is about eight ("about" because some never occurred alone or their status as displays is not proven).

In this respect, lechwe are not unusual. Wildebeest have thirteen displays classed as "agonistic" by Estes (1969), plus many others that appear regularly in territorial confrontations. Most lechwe threat behaviors—including a simple threat-chase, in which a male walks deliberately or rushes toward another with head at shoulder height and muzzle pointing forward—are shared by nonlekking antelope.

The most distinctive feature of lechwe aggression is the high frequency of the threat-chase, a behavior lacking the classic features of ritual and used to displace another male from its location when leks are organizing. In most males, the threat-chase is often executed with a slow, deliberate walk. The threat-chase of master males is usually a rushing charge, after which the defender races back to the females. The speed is functional. Challengers are denied the chance to enter the mating center by exploiting aggressive involvements of the master male. And master males often must interrupt a courtship sequence to expel a challenger. A briefly executed threat-chase allows the male to quickly resume the courtship in an almost uninterrupted sequence leading to copulation.

Ritualization is also absent when a challenger is not intimidated by the threat-chase of another. A continuous fight ensues, during which the horns remain interlocked for the duration—the animals vigorously pushing, twisting, and turning until one turns and flees. By means of such fights, interchanges occur on territories.

The only ritualized encounters occur during face-offs between territorial neighbors, sometimes known as "challenge rituals" (Estes, 1969). These are dominated by sequences of threats and appeasements executed in a slow, hesitant manner and with a duet quality of simultaneity that fully justifies the description of ritualized. One feature is worth noting because of its rarity: Threats are frequently accompanied by penis erection, a physiological sign of sexual arousal in an aggressive context. Significantly, it is also reported in the lekking kob but is absent in most territorial antelope. The erection appears instantly with the onset of threatening and disappears just as quickly when the threat ceases or during appeasement. It also disappears during actual fighting. Whether the erection can function alone as a threat is not known. But it is a classic example of a response's undergoing a change in function and motivation, a feature of ritualized responses sometimes known as "emancipation." Unlike encounters with threat-chases or

fight, challenge rituals have no clear winner or loser. The purpose seems more a social interaction than a confrontation, signaling territorial presence and boundaries. After a period of threatening, lasting as long as twenty minutes, the males slowly separate and return to their areas. Despite all the evidence of ritualization, the majority of challenge rituals include at least one brief period of fighting.

The pattern of lechwe aggression defies any attempt at a division between fighting and ritual. The most frequent behavior, the threat-chase, is an example of neither; the most ritualized confrontations include fighting. A more important distinction is between two different goals: to displace a rival or to interact with a territorial neighbor. These goals also seem to account for the degree of ritualization. Displacement aggression, whether by threat or by fight, is a nonritualized contest between rivals for the same territory. When no territory is at stake, interactions are full of ritual. Perhaps communication is more important between neighbors signaling their status. Also, their social status is more nearly equal, explaining the hesitation and frequent appeasement that can develop into ritual. Master males, judging by their behavior, occupy a dominant position over all others and are able to dispose of challengers with a brief charge.

An accurate description of aggression in any species should avoid simple dichotomies and measure the overall frequency of aggression; the frequencies of individual behaviors; and the degree of fighting, of ritualization, of injury, and of death—all as separate dimensions that can combine in all possible combinations.

*Is aggressive behavior self-motivated and inevitable?* More than any other proposition of the ethologists, the existence of action-specific energy has been the least accepted. Hinde (1960, 1974) has been especially critical of the accumulating energy metaphor. As applied to aggression, Hinde (1974), Marler and Hamilton (1966), Crook (1973), and Wilson (1975) agree that the evidence for such motivation is almost nonexistent and that aggression has many important causes, both internal and external, with complex interactions between them. At issue is why individual acts of aggression occur when, where, and how they do. What follows is a brief summary of the above critiques.

Internal motivational states are an accepted part of the explanation, but the existence of a separate aggressive drive is doubted. Changes in aggressiveness are most often associated

with reproductive condition and can be artificially induced with gonadal hormones, usually male. Internal state, however, is not the only factor. An animal's social organization can be the critical mediating factor. Antelope and birds are often territorial only during their breeding season or, if the territory is occupied for feeding at other times, show increased aggressiveness during the breeding season. Lechwe lek only during their main breeding season, when their testes are largest. Aggression is seen only when the animals are on their territories. If they are not on their territories, they can peacefully herd and flock even during their breeding seasons. A curious phenomenon in lechwe, also reported in wildebeest (Estes, 1969), is that males sometimes leave their territories to drink *en masse*, during which the tightly clustered males show little aggression. Hunger, too, can sometimes increase the frequency of aggression (Marler and Hamilton, 1966)—an effect, seen in captive chaffinches, which occurred because subordinates were more likely to approach dominants.

Attempts to discover a separate aggressive drive have met with little success. A priori, it is unlikely to be very common if aggression evolved for resource competition. The motive underlying changes in aggressiveness ought to be related to the needed resource. A motive to fight for its own sake would be selected against by the chance of injury or "aggressive neglect," excessive aggression at the expense of more productive behaviors. An "appetite" for aggression has been seen in some territorial species, such as hyena (Kruuk, 1972), that patrol their territories. Territorial wildebeest ritually challenge each neighbor at least once a day (Estes, 1969). The functions of patrolling must surely go beyond the mere urge for fighting to the overall purpose of territoriality. Challenge rituals may also provide social stimulation, which results in habituation to one's neighbors as a means of reducing aggression.

The search for other evidence of an aggressive drive has been even less successful. Social isolation should lead to increased aggressiveness, just as starvation causes increased hunger. But the effects of isolation are unpredictable, and increases in aggressiveness can be explained more generally as by-products of increased curiosity or sensitivity to novelty and fear. Long deprivation ought to produce rhythmic, spontaneous aggression *in vacuo* or against inappropriate targets, but this is almost never reported. Fighting should lead immediately to a period of reduced aggressiveness but often has the opposite effect for a

short time. When fighting does lead to decreased aggression, it may be for reasons other than the discharge of aggressiveness. The most obvious is that the goal of the aggression has been achieved. In lechwe, master males vigorously chase all competitors from the mating center until the area is cleared. The first victim is not treated more harshly than the last, and the number of successive chases has no effect on overall aggressiveness. The presence of a challenger near the mating center is the overriding elicitor of aggression.

Examples such as the above confirm that a motivation like hunger, which is cyclic and appetitive in order to maintain internal body condition in good order, is fundamentally unlike the effect that reproductive state has on aggressiveness. An appetite for aggression is rarely seen. Changes in aggressiveness are shown only by the likelihood that an external event, such as the presence of a conspecific, will lead to an attack. External situations are also known to influence aggressiveness toward conspecifics. A partial list includes crowding, the social organization and one's position in it, the presence of a stranger, the clumped distribution of resources, pain, fear, and conditions producing frustration. Previous experience can also modify aggressiveness, especially when aggression in the past has been rewarding.

In brief, the ethologists believe that aggressive acts are caused mainly by the buildup of aggressive motivation, making aggression both spontaneous and inevitable, even in the absence of any eliciting situation. Animal behavior supplies little evidence for an aggressive motivation and supports the view that aggression is mainly a reaction to external events and is modifiable by a variety of internal and external conditions, including past experience.

### Ethology and Human Aggression

Why human aggression? Lorenz believes that human aggressiveness is based on the same basic instinctive mechanisms found in animals. He also believes that they are no longer adaptive for the human species in our century and that, as a result, the species is endangered. The previous criticisms of ethological theory would seem to undercut the need for further discussion. The evidence from animal behavior does not support the existence of an aggressive motivation. And the adaptive variations in aggressiveness, violence, and killing among animals make human

aggression seem less of the functional failure that Lorenz believes. The following brief summary is justified by the amount of discussion and criticism that the theory has received. The failures of Lorenz will also be used to suggest areas of fact and theory that might lead to a biological approach encompassing both normal and abnormal human aggression.

According to Lorenz, man has inherited an innate aggressive motivation, and the rhythmic accumulation of this motivation must be released in aggression. Man has also inherited aggressive behaviors, which, like the chimpanzee Mike's, can accommodate weapons. To counteract the dangers of aggressiveness, man has a repertoire of cultural and innate rituals to release aggression harmlessly and social instincts and inhibitions against aggression. The whole was once adaptive for group defense by the hunter-gatherer bands of our hominid ancestors against competing groups. In modern society, however, a combination of natural selection, cultural evolution, and social organization has created a situation where man's capacity to restrain and redirect aggression is no longer sufficient.

The threat to our species arises from an imbalance between our motivation to use weapons and our inhibitions against using them. Aggressive motivation became excessive in our hominid ancestors through a process of uncontrolled natural selection analogous to extreme sexual selection, such as among lek males. In both cases, competition became uncoupled from any relationship to resources. In lek species, this independence is made possible by naturally abundant resources. Man achieved his evolutionary independence from his environment by dominating it with tools and weapons. In lek species, the competition was sexual. In man, the competition was more generalized, with neighboring groups. With nothing in man's environment to select against aggressiveness, it became a runaway trait.

The evolution of inhibitions was insufficient to neutralize the rapidly expanding aggressiveness of an armed hominid. Aggression was adaptive for living in a social system where cooperation in hunting and defense were vital. Such systems survive today in primitive peoples, such as the perpetually warring Mae Enga of Papua New Guinea (Meggitt, 1977). The most similar organization among animals is the group territoriality of social carnivores (Ardrey, 1967; Tinbergen, 1968). Like hyenas and wolves, men supposedly defended their hunting and breeding territory with a combination of group cooperation, leadership,

and violence. But social carnivores evolved with the strongest instinctive inhibitions against killing, because they are the most naturally equipped to kill. Man, lacking natural weapons, was under no strong initial selection pressure to evolve with killing inhibitions. After the invention of weapons, a "harmless omnivore" was transformed into a killing species that lacked innate appeasement behaviors. The rapid speed of cultural evolution made certain that the improvement and spread of weapons would forever outpace the slow natural evolution of compensating inhibitions. Their evolution was further slowed by the distance over which shooting and bombing weapons operate. A human killer, unlike a carnivore, is insulated by space from whatever injuries or agonies of his victim might be the natural releasers for killing inhibitions. In short, the invention of weapons sidetracked evolution into creating modern man with an aggressive potential unmatched by natural inhibitions against murder.

Aggression, like rising pressure in a boiler, is not dangerous unless it is dammed up. This was not a problem for prehistoric man because he was, like the Mae Enga, forever engaged in territorial defense with the close cooperation of his small band of relatives and friends. In modern society the chances for harmless release are cut off by a long list of "Thou shalt nots," backed up by punishing contingencies. The full potential of an excess of accumulated aggression is realized in the crowded and impersonal social environment of modern cities and states. The anonymity of both aggressor and victim removes still another source of possible inhibition.

In man alone, cultural ritualization of social customs could compensate for the low level of inherited inhibitions, as it did in traditional European societies. But twentieth-century society eroded traditional values by weakening the tie between adult and child in family, school, religion, and monarchy. Acknowledging the irrationality of many traditions, Lorenz nevertheless believes that they help to maintain the structure of society, even at the cost of "certain degrees of freedom." In effect, an attack on some cultural traditions is an attack on all. Worse still, the cultural vacuum provides an opportunity for new and dangerous associations to form. Street gangs, terrorist groups, radical politics, and demagogues can offer appealing substitutes for missing traditions. Teenagers are especially vulnerable. In an analogue to imprinting, there is alleged to be a "sensitive period," around the time of puberty, when new and durable



fixations are particularly easy to forge. The whole attachment process is further reinforced by the chance provided to release pent-up aggression. The result is "militant enthusiasm," a form of communal aggression that simultaneously rewards individuals with intense emotions and personal satisfaction, welding them into a mob with an irresistible urge for murder and destruction against outsiders. Surely, concludes Lorenz, such a compelling social phenomenon must be based on instincts, save for the releasing opportunities that an urban society provides in particular abundance.

Lorenz has fashioned an ingenious theory of human aggression that offers more targets than perhaps any in recent years. Critics have argued about his casual resolution of monumental issues: the evolution of man, his real nature, the need for a "best society" with social order based on a hierarchy, the danger of freedom. Acceptance also depends on the willingness of his critics to allow that Lorenz, unlike them, is years ahead of his time—but that soon "scientists" and "the majority of tolerably intelligent people" will come to "consider as an obvious and banal truth all that has been said in this book about . . . intraspecific aggression" (1966, p. 237).

The underlying weakness of the theory has little to do with unobtainable answers to monumental issues or the non-existence of aggression-specific motivation. In its basic construction, it is incapable of disproof. Let us agree with Hinde (1974) that man does have some kind of internal motivation which spontaneously affects aggressiveness, whether it is related to sex or to success. Let us also suppose that behaviors exist to antagonize aggressiveness, whether species-specific or cultural. According to Lorenz, dangerous and uncontrollable aggression occurs when the motivation for aggressiveness is much stronger than the inhibition against it. But there is no independent evidence to support the weighting of motivation over inhibition in humans or any other species. We are left with the uncomfortable circularity of inferring it entirely from the phenomenon it was supposed to explain, the level of aggressiveness in man or animal. Whatever level of aggression is assigned to a species will support the theory, given two completely unobservable processes that are free to vary independently of each other.

Equally troublesome is that the theory requires us to assess the level of man's aggression in relation to that of other species. Lorenz rates human aggression highest because he is bothered by the recent proliferation of nuclear weapons, politi-

cal terrorism, and urban violence. But one could be just as struck by how *little* violence occurs in even the most densely packed ghettos, in comparison to the aggressive and sexual nightmares created by overcrowding cats and rats. Man's reproduction continues, and murder remains a rarer event per capita than in the low density of a lion society. War is an obvious instance of mass murder; the Nazi atrocities even more so. But is a war between rival armies to be counted as one quarrel between two countries or as thousands between individual soldiers? These comparisons are not offered as evidence that man is or is not less aggressive than a lechwe or a lion. Measurement problems across species make such comparisons meaningless. What is an aggressive behavior? Hinde (1974) discusses the problem at length. If joke telling or capitalist competition were not included, the level of man's aggressiveness would alter accordingly. How should we weigh the many dimensions of aggressive behavior? Is the lechwe more aggressive than the lion because the lechwe fights more often, or is the lion more aggressive because it kills? Does a ritualized response count more than an unstereotyped threat-charge? Should a fight in a widely dispersed species count more than in a densely packed species? Should intraspecific aggression count the most?

In man, the problem of assigning a level of aggressiveness to the species as a whole is further complicated by cross-cultural variations even more diverse than the intraspecific variations in social organization seen among animals. By selecting supposedly peaceful societies such as the Pygmy, Eskimo, or Bushman, some writers make a claim for nonviolent man. Unusual cases such as these demonstrate that man is capable of living peacefully under some conditions. But a true assessment of man's aggressiveness would require knowing how readily man can be made to live peacefully under different kinds of conditions, and whether man finds it easier to live aggressively or peacefully under varying conditions. Such an assessment would reveal genetic predispositions that affect the ease with which culture can influence man to behave in one way or another. While we can assess inherited learning abilities in animals (Seligman and Hager, 1972) and infer them from man's unique facility, for example, to learn language, deducing aggressive potential from cross-cultural data is more difficult. This is illustrated by Lorenz's controversial example of the American Ute Indians with their "excess of aggressive drive" (Stewart, 1973).

Another untestable feature of the theory is the assertion

that man was a harmless omnivore, not the fabled savage killer and hunter. He could have been either, especially since there is no correlation between intraspecific aggressiveness and hunting, as the example of the lechwe shows us. The fossil record and other records of the life of primitive societies have attested to the probable importance of an omnivorous diet in shaping man's anatomy, tool using, intelligence, and social behavior differently from the primarily herbivorous great apes. Exactly what impact an omnivorous diet had on aggressiveness is not clear, since not all carnivores regularly kill their own. Lorenz seems naive in imagining that a weaponless species of *Homo* evolved and, upon discovering weapons, was suddenly unbalanced by the chance to kill. Physical anthropologists, who rarely agree, are unanimous that the evolution of man, his behavior, his tools, his intelligence, his cultural ability, and his social systems were interrelated aspects of a single process of adaptation, in which the early use of primitive tools affected the later course of events. We will never know the level of aggressiveness in man before cultural evolution transformed the environment. Nor can we test whether aggressiveness or inhibition was more adaptive as man evolved.

Let us, then, adopt a reasonable and detached approach to aggressiveness. If a trait is carried in a species that is as successful as ours, there is a good chance that the trait is, or recently has been, adaptive. Applying the concept of behavioral scaling, we might also find that a trait like aggression is adaptive both when it does occur and when it does not, depending on the value of aggression under different conditions or environments. By relating differences in environmental conditions to differences in aggression, we can gain a better idea of when aggression has become abnormal. The most important point is that if aggression is destructive in a particular environment, such as an inner-city ghetto, the proper conclusion is that the fault is not in man's excessive aggressiveness but in aspects of that environment, including crowding, poverty, hunger, frustration from all the goods and services that are advertised, parental neglect, and a sense of helplessness.

Any attempt to assign a single level of aggressiveness to man must give way to studies that compare the value of aggression in different social systems. This approach would recognize that adaptive social systems can incorporate varying levels of aggression, even occasional violence and death. As Schaller (1972) warned, if one wants to make a case for condemning human

aggression as nonadaptive, he cannot do so by assuming that animal societies are always nonviolent. The nonadaptiveness of certain cases of human aggression can be evaluated only against other human societies, not against any animal society.

The existence and importance of species-specific aggressive behaviors can be uncovered through a number of procedures devised by human ethologists for neutralizing cultural influences (Blurton-Jones, 1972; Eibl-Eibesfeldt, 1970). For instance, one can study the social behaviors of infants and young children and of children born deaf and blind, or he can compare patterns of social interaction cross-culturally, particularly non-verbal forms of communication.

Finally, one can discover many of the causes of individual acts of aggression by studying and comparing different social organizations, searching for conditions that influence aggression—conditions such as parental care. These findings would complement laboratory studies on animals showing that the frequency of aggression can be manipulated by many environmental conditions during development and in the immediate environment. By stressing internal conditions, and therefore contending that an innate drive underlies all acts of aggression, Lorenz can only prescribe methods of harmless release as a means of curing dangerous aggression. An appreciation that both internal and environmental conditions contribute to aggression promises more hope for those societies in which aggression has become a danger.

# Sociobiological Theories of Abnormal Aggression

*Vernon H. Mark*



In 1970 Frank Ervin and I wrote a book called *Violence and the Brain*, which focused on the relation of brain abnormality to abnormal behavior. The most important idea in this volume was stated in the chapter entitled "The Either/Or Philosophy" and forms the basis of the sociobiological theory of abnormal aggression. This theory is not novel. It has its experimental roots in the observations of George Ellett Coghill and the brothers Herrick; and its clinical roots are nurtured in the philosophy of Percival Bailey, the renaissance man of the nervous system, who combined the fields of neurosurgery and neuropathology with medical neurology and clinical psychiatry. It is a unitary theory. It is dependent upon the fact that the brain functions as a whole with its environment and that the two are inseparable.

This theory has generated critics. Some claim that it is invalid because not enough is known about the brain to describe

its function in clinical behavior. Others describe the theory as an artifice for doing "psychosurgery." Eventually, I suspect, it will collect the "so what" critics, who will claim that the whole thing "was so obvious that there was no need to write about it in the first place." Until that day arrives, however, further discussion is warranted, and the following paragraphs provide the details.

### The Theory

Human behavior, violent or peaceful, is always the product of *brain-environment* interaction. Neither of these two influences can solely determine behavior, although many sociologists and some neurologists apparently believe otherwise. This dualistic view, which states that behavior is generated *either* by the environment *or* by the brain, impedes any rational approach to the understanding and treatment of violent individuals. And it is translated by many sociologists, psychiatrists, psychologists, and public officials to mean that human disorders characterized by dementia, paralysis, and blindness are brain problems—problems to be handled by neurologists. At the same time, they insist that people with emotional disturbance or behavior disorders—including the expression of violence—have a problem solely determined by faulty environment. Thus, they reason, these problems can be handled only by social scientists or social psychiatrists. Furthermore, some of them deny that an alteration in brain function could play a role in these disorders; in fact, they tend to believe that violent individuals do not require a thorough examination of brain function.

This separation of brain from environment has ancient roots, for "dualism" can be traced back at least to Aristotle. He distinguished between the soul (mind) and the body, and he subdivided the soul into two parts. One he considered irrational—that is, "shared by man with all living things and vegetative." The other part is "sometimes irrational and yet in a sense partakes of reason." Aristotle's views became the orthodoxy of the Church and as such affected the work of investigators interested in the nature of the brain. Dualism was still the accepted point of view in the seventeenth century, when René Descartes began his ruminations on the nervous system. Descartes was the first to describe reflex activity; but since he wished to avoid antagonizing the academic and religious establishments, he said that reflex actions—such as walking, running, and moving the arm

away from fire—are responsive to the commands of the lower nervous system; and he carefully separated these reflex actions from the “mind,” which carries out the process of thinking.

Descartes’s opinions, which thus perpetuated Aristotle’s dualism, influenced later experimental neurologists, such as Sir David Ferrier and Sir Charles Sherrington. Sherrington, whose outstanding experimental work laid the foundation for major present-day concepts about the central nervous system, believed that only the mind is involved in the process of thought and that this capacity for thought is separate from the function of the brain. In this century it was not until the work of George Coghill and the brothers Herrick that experimental neurology began to unify the concepts of mind and brain. Coghill was able to show that the developing nervous system in salamander larvae acts as an integrated whole, so that bodily movements are coordinated and the larvae are able to swim and find food while their sense organs and sensory nerves are as yet unformed. As the sensory system develops, it refines and synchronizes the animal’s behavior, but it does so on the basis of the integrated pattern already established. It takes control of a motor system that is already working in a coordinated and efficient manner.

The more that brain scientists have discovered about the brain, the clearer it has become that brain responses and the parallel behavior are not separate events—that is, no aspect of human behavior is supernatural. Once we are aware that thinking is a physical process, Aristotle’s “soul” and Descartes’s “mind” are no longer useful concepts. Unfortunately, dualism still lives on in the work of those who wish to explain the causes of behavior without taking the brain into account, and hence distinguish environment as a separate factor in generating emotional reactions.

Up to this point, the dualistic view is not supported by meaningful evidence. Once environment is perceived by the brain, it is incorporated into the brain as a function of memory. Furthermore, any influence that environment has on behavior is exerted exclusively by the brain. Obviously, the normal performance of complicated acts of human behavior does require the function of many bodily organs besides the brain. Nonetheless, we know that the brain does govern what we do. Meaningful behavior is still possible when someone is blind or deaf; a person whose arms and legs are paralyzed still functions in a complicated and purposeful although limited way; the loss of stomach, gallbladder, and/or large portions of the intestine does

not prevent meaningful behavior; and the use of kidney, liver, lung, and heart transplants has proved that the recipient's personality and behavior are not changed as long as these transplants function adequately. The injury or destruction of critical parts of the brain, however, affects behavior in a most dramatic fashion. A tiny damage to the midbrain, for example, will put an end to all meaningful behavior by producing profound and permanent coma. Heart, lungs, liver, and kidneys may function quite adequately and life may persist for a considerable length of time, but there is no perception of or adaptation to the environment.

The brain is unique among body organs in that it does not function exclusively within the confines of the body. Through the retina of the eye and the nerves that receive and convey sensory perceptions of the world, the brain operates outside the skull, confirming and interacting with the external events as well as those that occur inside the body. It is also unique in that it has the capacity, after perceiving these events, to store them for future reference in its own tissue. This process, of course, is what we call memory; and it is an essential part of learning, for past experiences of all kinds play an important role in determining an individual's reaction to current environmental stimuli. To put it another way: past environment, in the form of memory, determines to a great extent how we react to our present environment; but memory itself is actually incorporated in brain tissue, and thus information retrieval is a brain process. Our past environment, once it is past, is no longer a sociological phenomenon. It is imbedded in our brain, and its use is dependent on the function or malfunction of the cerebral tissue.

Major parts of the memory circuit are in the same anatomical location as the limbic brain. We know that these areas are important for memory because of what happens when they are damaged. If, for example, both hippocampi are injured, a man may literally be unable to remember what happens from one minute to the next. If someone says "good morning" to him and then moves out of his sight for more than thirty seconds, this man will not be able to remember seeing or speaking to the other person when he steps in front of him again. Memories from before the time of injury may remain intact, but the inability to retain recent memory will naturally produce significant deterioration in behavior.

In contrast, extensive lesions or damage to the thalamus



and hypothalamus may cause profound deficits in the entire memory relationship to the world. The whole personality structure may be involved in such a memory loss, with subsequent distressing changes in behavior.

Another aspect of "memory" in the social sense is the ability to retain and follow cultural rules governing behavior. The "rules" for urination, for instance, are culturally determined and rigidly controlled and enforced. We learn them when we are young and follow them thereafter. Yet a lesion in the brain is able to destroy even this kind of strictly regulated behavior.

Sensible behavior in the environment, then, depends on normal brain function; at the same time, the brain functions very poorly in the absence of a meaningful environment. In fact, it tends to malfunction under conditions of sensory deprivation or monotony. Furthermore, anatomical development of some segments of the brain depends on environmental stimuli. If a kitten's eyelids are sutured directly after birth and reopened three months later, the kitten will be blind, because cells in the visual pathways of the brain will have degenerated. On a more complex level, maternal deprivation in newborn monkeys produces profound behavioral changes, which persist throughout the monkey's life. These deprived animals have a distinctly inappropriate or exaggerated flight or fight reaction, indicating dysfunction of the brain stem or limbic brain. The brain areas governing sexual activity are also affected by this environmental deprivation; some of these male monkeys engage in homosexual activity, but most of them are unable to complete normal coitus with a receptive female.

The central nervous system always acts as a unit in responding to the environment with any kind of behavior, including violence. The brain is involved, therefore, even when some plausible environmental cause precedes a violent action. However, a poorly functioning brain—particularly one with disease or malfunction of the limbic system—is much more likely to be triggered into expressing abnormal behavior by a minimal or inappropriate environmental stimulus than a normal brain is.

In summary, the separation of "mind" from body was the historical idea that nurtured the separation of "environment" from the brain. Brain scientists have largely discredited the mind-body dualism, but the environment-brain dualism lives on in the minds and actions of many social scientists. They believe that violent behavior is caused only by defects in the envi-

ronment. Some of them go so far as to admit that the brain may play a significant role in behavior, but many claim that it is no good investing time and money in brain research because the brain is too complicated and poorly understood. At the same time, their efforts to control violent individuals by rehabilitation or by punishment are based on the assumption that these individuals (*a priori*) have a completely normal brain. That some of these people may have brain disease and are candidates for a combined medical-sociological approach seems to elude them. Often, in their isolation from biologists and brain physiologists, they fail to realize that every element of environment is intimately connected to brain and brain function; by ignoring this fact, they not only disregard the futility of their solo efforts to treat people with brain injuries but also pass up the opportunity to learn new methods of diagnosis and treatment of the violent individual.

### Neurological Disease and Abnormal Aggressivity

As stated in the preceding section, all behavior, including violent behavior, is the result of environment-brain interaction. Even in our present state of knowledge, it would be incorrect to say that either environmental factors or brain factors are the exclusive cause of abnormal aggression.

Although the entire brain acts as a unit in responding to environmental stimuli and in initiating behavior, there is some specialization among its parts. The limbic system, for instance, is most intimately involved with the modulation and elaboration of the fight or flight responses that are so important for the preservation of vertebrate species when under attack. Papez (1937) and other investigators have implicated the limbic brain in a variety of emotional functions, and some have called it the "emotional brain." In this context, when we refer to the limbic system, we mean to include the cingulum, hippocampus, septal nuclei, and commissures of the older anatomists, together with related portions of the thalamus, hypothalamus, basal ganglia, midbrain, amygdala, and orbital region of the frontal lobe.

There are two sources of evidence relating the limbic system to aggression; namely, experimental and clinical. The focus of this section will be largely on the amygdala, although the evidence is equally impressive for other portions of the limbic system, including the ventromedial hypothalamus.

*Experimental Evidence.* The animal experiments can be divided into those related to brain stimulation and those related to brain destruction. Stimulation in or near the amygdala has been extensively studied and has produced defense or flight reactions in many species of unanesthetized mammals. DeMolina and Hunsperger (1959) and Ursin (1960) emphasize that the area from which rage can be evoked is restricted to a small part of the amygdala. The converse response of placidity is harder to establish in animals, but Anand and Dua (1955) have reported calmness progressing even to sleep. Egger and Flynn (1963) have reported both types of behavior—facilitation of hypothalamically induced attack responses from lateral amygdala and suppression of such responses from more medial sites in the amygdala. Earlier, Alfonso-DeFlorida and Delgado (1958) had obtained both positive and negative effects on aggressiveness upon prolonged stimulation of various points in the amygdaloid complex.

Ursin, upon reviewing twenty articles in 1965, concluded that the most common effect of bilateral amygdaloid destruction is a marked reduction or taming of flight or attack behavior. In an extensive study by Kling (1976) of a free-living monkey colony, bilaterally amygdalectomized animals became too placid for their own safety when reintroduced into the colony. The cats of Bard and Mountcastle (1948), however, exhibited sustained ferocity postoperatively for months. The cats of Wood (1958) were less consistent, but bilateral lesions of the central nucleus in four of ten animals, and of the basal nucleus in five of ten animals, were followed by increased aggressiveness. The bilaterally amygdalectomized monkey of Rosvold, Mirsky, and Pribram (1954), having ranked third in a colony of eight monkeys, became aggressive postoperatively and drove the animals previously ranked first and second down to eighth and seventh, respectively, the other animals then moving up two notches.

Experimental evidence should be interpreted with the greatest care, particularly when one seeks to apply that evidence to the clinical situation (Mark, 1975). Brain research carried out in experimental animals, including the primates, can provide only a rough comparative guide to the function of the human brain. This is obvious when one considers man's possession of language, drawing, and musical skills and the unique powers of adaptation of the human brain not found in any comparable

degree in the brains of nonhuman primates. But the lack of close correspondence between human and nonhuman brains is not restricted to these so-called "higher functions." The difference between human and nonhuman motor systems is so profound that meaningful studies of hemiplegia, for example, are largely dependent on observations of humans only. Furthermore, the difference between human and nonhuman spinal pathways transmitting sensations of temperature and pin prick (and some forms of pain) is so great that the pain-relieving operation of spinothalamic cordotomy would have remained undiscovered had it not been for anatomical and clinical observations made in patients with spinal disease.

Drewe and his associates (1970) have pointed out that animal studies involving the surgical removal of brain tissue are usually done in *normal* subjects. The attempt to utilize such information in predicting the effects of the surgical removal of brain tissue in patients with brain abnormalities is often not productive. In patients afflicted with structural or functional brain disease, it is very difficult to take into account such variables as the nature, extent, and duration of the disease process.

Chorover (1974) implied in a national magazine article that portions of the Klüver-Bucy syndrome would be reproduced in patients subjected to bilateral amygdalotomy. This syndrome had been reported by Klüver and Bucy (1937, 1939) in monkeys following bilateral temporal lobectomy. The animals became unnaturally tame and hypersexual; they orally examined objects indiscriminately and had other severe neurological deficits. However, when Vaernet (1973) of Copenhagen had performed his forty-fifth bilateral amygdalotomy in patients with temporal lobe epilepsy, he reported no instance of this syndrome as a postoperative complication.

*Clinical Evidence.* The evidence relating abnormal aggression to limbic disease and brain dysfunction in humans can be reviewed under three headings: structural brain disease, epilepsy, and brain poisoning.

*Structural brain disease.* Limbic brain tumors have been associated with abnormally aggressive behavior. Published reports of such tumors include one of Cushing (1929); one of Alpers (1937); one of Vonderahe (1940); one of Dott, reported by Hill (1944); four of Malamud (1967); one of Reeves and Plum (1969); three of Sweet, Ervin, and Mark (1969); and one of Mullan (1971). The lesions and sites included one inferior

posteromedial frontal abscess; one angioma of the temporal pole; one subfrontal meningioma; four invasive, slow-growing gliomas (three temporal and one gyrus cinguli); one temporal glioblastoma; three hypothalamic tumors; one glioma of the optic chiasma; and one colloid cyst of the third ventricle. In five patients diagnosed antemortem, surgical attack on the tumor was followed by cessation of the violent behavior. In other cases the tumor was a postmortem finding.

Specifically excluded from this section are the small temporal lobe hamartomas, which in one series were found in 22 percent of the temporal lobe epileptics studied by Falconer and his associates (1958).

Two additional cases of brain tumors with aggressive behavior have been reported recently. One of these patients, a 15-year-old boy with outbursts of violent behavior, was found to have an ectopic pituitary adenoma compressing the medial surface of the right temporal lobe and invaginating the inferior aspect of the third ventricle (Rothman and others, 1976). The other patient, a 21-year-old male who assaulted another patient while in a hospital, had temporal lobe epilepsy that was unresponsive to anticonvulsant therapy. He became asymptomatic after removal of a cystic schwannoma from the anteromedial temporal lobe. The history in this patient is noteworthy because he experienced violent behavior during a period of amnesia immediately following the aura of his seizures (Van Rensburg and others, 1975).

Patients with craniocerebral injuries, especially young men, often go through a phase of hyperactivity and belligerence. In many, the cerebral injury is too diffuse to permit correlation of one specific area of the brain with this symptom. However, McLaurin and Heimer (1965) reported as "restless and combative" seven of twelve patients with contusions of the temporal lobe. In nine of these twelve patients, the diagnosis was verified by open operation; in the other three, by clear-cut evidence in special radiographic studies.

Temporal lobectomy provided good relief of symptoms in two patients who exhibited violent behavior after significant temporal lobe injuries. Both patients had abnormal electrical discharges in the limbic system, but neither of them had any seizures (Adams, 1973).

Viral disease of the limbic system, such as herpes encephalitis, may be related to emotional changes and combative-

ness. Of course, rabies—whose name in French, German, and Italian means rage—has, as the most characteristic of its lesion sites, inclusion bodies in Ammon's horn.

*Epilepsy.* Another category of limbic disease includes functional derangement of the brain, as seen in epileptic patients. By far the most common focal cerebral disorders associated with poor control of destructive impulses and rage are those which also give rise to limbic system epilepsy. Henry Maudsley (1874) had the opportunity to study epileptic patients confined to an asylum and untreated by anticonvulsant and ataractic therapy. He described the auras of temporal lobe epilepsy (without anatomical correlation) and the ictal and interictal violence and assaultive behavior seen in his patients.

The occurrence of abnormal aggressivity in epileptic patients has varied with the group being studied. In some reported series, the clinical correlations of limbic epilepsy with aggression have generated comments on the frequent outbursts of anger, often appearing after minimal provocation. Gastaut, Morin, and Lesèvre (1955) recorded paroxysmal rages in 50 percent of their epileptics of the temporal lobe type. Falconer and his associates (1958), reporting on fifty patients whose temporal lobe epilepsy was associated with a predominantly unilateral spike focus, found as the most common personality disturbance in 38 percent a "pathological aggressiveness occurring in outbursts in an otherwise adjusted individual" (p. 398). Another 14 percent had "an often milder but more persistent aggressiveness associated with a continued paranoid outlook." Rages, with typical French delicacy called "endogenous bouts of impulsiveness," became so severe in thirty-eight epileptic patients of Roger and Dongier (1950, p. 594) that these patients had to be confined to mental hospitals. Each of these thirty-eight had classical neurological symptoms of temporal lobe epilepsy, evidence of EEG foci in scalp leads from temporal or inferior frontal regions or both. In view of these facts, one would anticipate that a feeling of anger might be reported in man as an aura ushering a frank seizure of temporal lobe epilepsy or that a directed assault might be a symptom occurring during such a seizure. In the published accounts, however, the majority of patients who described any emotional component of their seizures classified it as fear. Other emotions—such as anger, sadness, pleasure, and joy—were reported much less frequently.

Currie and his associates (1971) studied 666 temporal lobe epileptics seen in a general hospital. Only sixteen had rage

attacks as part of their seizures. According to Penfield and Jasper (1954), "Neither localized epileptic discharge nor electrical stimulation is capable of awakening the emotions of anger, joy, pleasure, or sexual excitement." Similarly, Gloor (1967, p. 118) concludes that "rage with or without aggressive behavior is an extremely rare ictal phenomenon." Of fifty patients treated by Paillas (1958) with surgery of the temporal lobe, twenty-six had affective symptoms as part of their seizure patterns. These symptoms consisted of fear or a generalized unpleasant feeling in eighteen; only two had "angry impulses," and one had a desire to bite himself.

Fear, however, may precipitate attack behavior. This was true in two of our own patients with inlying electrodes, to be described later in this chapter. These two patients had an aura containing an element of fear immediately preceding their destructive or assaultive acts. Abnormal aggressivity is clearly more frequent as an interictal rather than as a seizure phenomenon. Ounsted, Lindsay, and Norman (1966), in a study of one hundred temporal lobe epileptics, found that thirty-six developed repeated episodes of "catastrophic rage" while under their observation.

Another line of evidence is derived from the surgical removal of limbic structures. Ablation of medial temporal lobe structures has been carried out most often in the form of a temporal lobectomy in patients with temporal lobe epilepsy. One of many series of temporal lobectomies is that of Walker and Blumer (1975). In fifty of their patients, seventeen had aggressiveness of such severity that it disrupted their entire environment, and twelve had lesser degrees of aggressivity. After temporal lobectomy, only five had abnormal aggressivity.

Ablation of only part of the temporal lobe—namely, in and around the amygdala—has been carried out bilaterally, mostly in assaultive, hyperkinetic, or self-mutilating individuals with mental retardation, psychosis, or temporal lobe epilepsy. Walker (1953), commenting on four psychotic patients, mentioned only a temporary postoperative placidity, with no effect on their psychosis. Sawa and his associates (1954) did this operation in five schizophrenics, five epileptics, and one assaultive patient with severe retardation. Rage reactions appeared early after operation; placidity appeared later and lasted longer. Narabayashi and Uno (1966) reported on ninety-eight mentally defective patients. Among the thirteen adults who had rage reactions, four of them were dramatically improved after the

operation, three improved temporarily, and six showed no improvement. Vaernet and Madsen (1970) achieved elimination or marked reduction of aggressive episodes in eleven of twelve schizophrenics. In thirty-six patients with psychomotor seizures, Vaernet (personal communication, 1972) did bilateral amygdalotomy in seven and unilateral amygdalotomy, together with contralateral anterior temporal lobe resection, in two; he found significant improvement of behavioral disturbances in four patients.

Balasubramaniam and his coworkers (1972) have reported the largest series—128 patients treated with bilateral amygdalotomy, of whom fifty-three were epileptics. In only nine was the destructive rage behavior eliminated; these patients did not need drugs postoperatively and were able to mingle in society. Forty-five patients had some improvement, with only occasional outbursts of rage behavior. The remaining patients were not affected by their surgery. Siegfried and Ben-Shmuel (1973) did the bilateral operation on eight patients; they obtained complete improvement in one, and some improvement of the aggressivity in four. Turner (1963) did sixty-three bilateral temporal lobotomies, 1 centimeter from the tip, in aggressive psychomotor epileptics. Psychomotor attacks were abolished in 65 percent, and major rage attacks ceased in all his patients.

There is some evidence that neighboring areas in the limbic system may have adversary roles. Animal experiments, for instance, suggest that one area in both the hypothalamus and the amygdala may be associated with aggressiveness, whereas a neighboring area may be associated with placidity. Clinical observations of a discrete hypothalamic tumor associated with aggressive behavior (Reeves and Plum, 1969) and iatrogenic hypothalamic lesions associated with placidity (Sano and others, 1970) correlate well with experimental observation. As far as the amygdala is concerned, there is suggestive evidence of adversary systems in close topographical proximity. In our own studies, one patient had ictal rage attacks, during which he inflicted verbal abuse and sometimes bodily harm upon his family, following a temporal lobe epileptic aura. This aura, of face and chest pain, could be reproduced by electrical stimulation of the central and medial amygdala. The patient would know that he was about to do something violent and would find it difficult to stop himself. However, his mood could be changed dramatically by stimulation just lateral to the medial electrode in the amygdaloid nucleus; he would become calm



and relaxed, and his subjective responses would reflect this change (Mark, Ervin, and Sweet, 1972; Stevens and others, 1969).

Even though electrical stimulations at different points in the amygdala showed diametrically different responses, these data should be interpreted cautiously. The brain being stimulated was an epileptic brain, and the stimuli in both the medial and the lateral positions were used to recreate segments of epileptic seizures. Psychomotor seizures are often very complex and may contain fragments of widely differing behavior. That this situation can occur naturally was shown by the previously cited patient with the schwannoma of the temporal lobe, whose seizure aura began with a feeling of pleasure and relaxation and ended in violent assaultiveness (Van Rensburg and others, 1975). In our patient, we used the focal electrical stimulation to reproduce fragments of seizure behavior—one fragment with a feeling of impending violence and another fragment with a feeling of relaxation. Whatever may be the relationship between these two seizure responses, they probably do not reflect physiological organization in a normal brain.

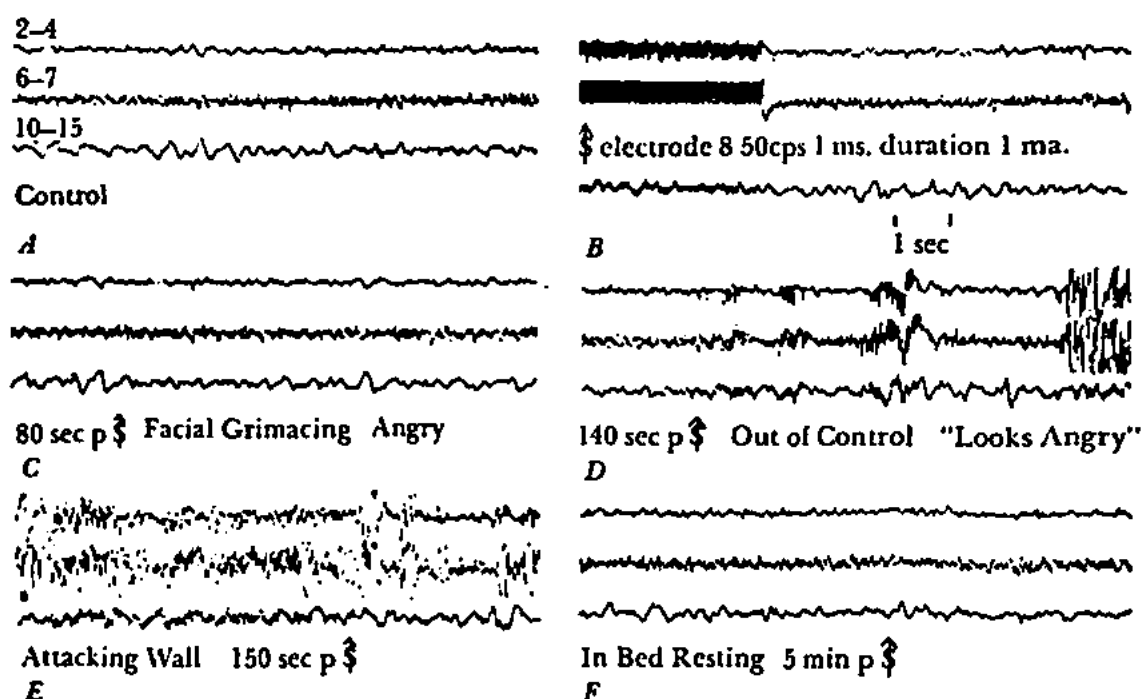
Recently Narabayashi (personal communication, 1976) performed fractional destructive lesions in the amygdalae of forty-seven abnormally aggressive epileptic patients. He found twenty-six of thirty-six patients with medial or central amygdaloid lesions so relieved of their symptoms that they could return to work or school. However, only one of eleven patients with lateral amygdaloid lesions was so benefited.

It is our opinion that an individual with a diseased or malfunctioning limbic system decompensates, as far as abnormal or inappropriate aggressive behavior is concerned, more readily than an individual with a normal brain, when both are subjected to environmental stress. The degree of decompensation and its relationship to environmental stimuli vary with the kind and severity of limbic system disease. The differing patterns of behavioral response can be shown, to some extent, by the effect of electrical stimulation within the amygdaloid nucleus in two epileptic patients described in the following paragraphs.

One patient in our series had temporal lobe seizures, accompanied by very unpleasant and frightening hallucinatory experiences, as well as seizures characterized by an overwhelming fear or rage. This patient had been treated by psychiatric and medical means for many years without success. Our implanted temporal lobe electrodes showed, in a sequence with

telemetered recording and stimulation, that amygdaloid stimulation produced grossly abnormal electrical discharges in the amygdala and that these discharges were followed by attack behavior; the behavior was part of a seizure, and environmental factors played a relatively minor role (Mark and others, 1969; see also Figure 1).

Figure 1. Telemetered EEG Tracings from Patient with Implanted Temporal Lobe Electrodes, Taken During Episode of Induced Attack Behavior in a Hospital Room



*Note:* A: Control recording from three points: (2-4) = anterior amygdala; (6-7) = posterior amygdala; (10-15) = just behind amygdala. B: Interference patterns appearing upon application of stimulus. C: Facial grimacing noted 80 seconds after stimulation but not accompanied by electrical correlates. D: After 140 seconds, cascades of spiking indicate frank amygdaloid seizure. E: At 150 seconds, patient suddenly springs up and attacks the wall with both fists. F: Five minutes after stimulation, brain wave record now normal, patient resting in bed.

Another patient had frequent episodes of interictal assaultiveness but only three ictal episodes of aggression. However, he had an aura that was common to both his attack behavior and his numerous seizures. This aura was reproduced by electrical stimulation in the amygdala. On a number of occasions, however, stimulation produced only seizures and failed to produce any obvious behavioral change—except on the one day when this patient had been emotionally upset by his family. On that day, several amygdaloid stimulations produced only one transient seizure; four minutes after the last stimulation, how-

ever, the patient had one of his most serious and completely undirected episodes of attack behavior (Mark and Sweet, 1974).

*Brain poisoning.* A familiar type of brain dysfunction linked to violent behavior is brain poisoning, the most frequent cause of which is alcohol. Alcohol is a specific brain poison, and individuals acutely poisoned with alcohol may have as much brain dysfunction during intoxication as would be caused by a brain tumor, infection, or injury. Automobile-alcohol violence causes more deaths and serious injuries than guns, knives, and clubs. McFarland, Ryan, and Dingman (1968) found a correlation between the blood alcohol level of drunken drivers and their chance of producing severe or fatal injury. Lee (1962) has shown in experimental studies that small amounts of intra-arterial alcohol break down the blood-brain barrier in thalamus, hypothalamus, amygdala, and hippocampus before afflicting other portions of the brain.

*Unanswered questions.* There are questions that can be asked of the limbic system-violence hypothesis. First, do we know the exact mechanism of environment-brain interaction, or the exact kind of limbic system dysfunction or electrical discharge that will invariably produce aggression or violence? The answer to that is no. Even though the evidence is suggestive, it is far from complete. Indeed, our understanding of neurological mechanisms in less complex situations—for example, spastic hemiplegia—is still incomplete.

Second, how important is the role of limbic system disease in public violence? Again, this question is difficult to answer. In fact, clinicians have difficulty in making the diagnosis of limbic brain disease when it is present. The following case illustrates this point.

A young man tried to kill a number of people and commit suicide while attempting to hijack an airplane in midair. He succeeded in killing the copilot and wounding the pilot before being subdued. He received a concussion and was hospitalized. A subsequent consultation brought out the fact that the patient had had a self-inflicted penetrating gunshot wound in his brain eleven years before, with hemiparesis and dilated pupil. Repeated neurological examinations, psychiatric interviews, and psychometric tests had revealed only the hemiparesis, mild defects in visual comprehension and memory, and an inferior quadrantic field defect. No major sign of limbic system disease was found. Six hours of EEG examination showed very rare temporal slowing and two delta waves but did not disclose the

limbic abnormalities that were found in contrast roentgenograms of the brain. The patient was released from the hospital and placed in jail, where some months later he committed suicide. A brain autopsy revealed a large unilateral atrophic process involving the thalamus, hypothalamus, globus pallidus, lower portion of the capsule, amygdala, and hippocampus, characteristic of an old ischemic infarction (Mark and Southgate, 1971).

The point in this case is not the relation of the pathological brain lesion to abnormal behavior, for this is unclear. The point is rather the ineffectiveness of current neurological and psychiatric tests for the diagnosis of gross lesions of the limbic system. It is hoped that the introduction and more frequent use of computerized tomographic studies of the brain will help to relieve this difficulty (Menzer, Sabin, and Mark, 1975). Certainly this test can be done without risk to patients and—when used intelligently along with physical, neurological, and psychiatric examinations and other tests—can be a useful screening tool. Unfortunately, it is of limited value in diagnosing temporal lobe pathology and has not replaced pneumoencephalography in this area.

### Sociological Theories of Violence

Violence is, without question, both prominent and prevalent in American life. Murder, rape, aggravated assault, assault against infants and children, and traffic violence are common examples of violent behavior. We cannot pretend to say how much of this mayhem is committed by individuals with abnormalities of the brain, since we have no factual data. We can say that seriously violent acts are likely to be carried out by individuals who have given some warning of trouble to come; there is considerable evidence that much of the violence is done by people who have poor impulse control, who have a previous history of violent acts, and who keep repeating their impulsive and violent behavior even when it should obviously be in their own interest not to do so (Bach-y-Rita and others, 1971).

Whatever the underlying causes for this violence, the fact is that it does exist, and its incidence is apparently rising. The best efforts of sociologists, educators, psychologists, social psychiatrists, and public officials, along with millions of dollars in governmental aid, have not been able to reverse this trend or diminish the amount of violence. The question thus arises: Can this violence ever be controlled by the kinds of environmental manipulations now being used?

Even though sociological and environmental approaches to control violent behavior have failed to produce much in the way of constructive results, they should not be lightly dismissed. Social and environmental influences on brain and behavior are important. An extensive amount of work has been done in the fields of sociology, criminology, and social anthropology, as indicated by the large literature on the subject of human violence.

One important sociological theory about the causation of violence is the culture-conflict hypothesis of Sellin (1938). Conflict has been described as a natural outgrowth of the process of social differentiation, which, in turn, produces an infinity of social groupings—each with its own definition of like situations, its own interpretation of social relations, and its own ignorance or misunderstanding of the social values of other groups. The proponents of this theory suggest that the transformation of a culture from a well-integrated, homogeneous one to a disintegrated type is accompanied by an increase in conflict situations. If this theory has universal applicability, a completely homogeneous society should be a peaceful one, but the example of Hitlerian Germany suggests that this concept must have exceptions.

Some social scientists have developed useful models of violent behavior on the basis of individual and group frustrations, with consequent aggressive behavior. While it is certainly true that frustrating environmental situations play a genuine role in generating violent behavior, individuals vary greatly in their tolerance of frustration. Furthermore, the relation of frustration to violence, in any given individual, is by no means constant. Clearly, the individual's threshold for violent action does affect the outcome of the frustration experience. The applicability of this model to group behavior is another matter.

Wertham (1966), among others, has emphasized the role of mass media, particularly television, in changing the climate of public opinion and the level of general acceptance of violent behavior. This is an appealing hypothesis, but it is difficult to get objective evidence or to devise experimental situations that give a convincing formulation of the effect of mass media on human behavior. Bandura, Ross, and Ross (1963a) studied the effect of aggressive models (in motion pictures and cartoons of violence) on forty-eight boys and forty-eight girls enrolled in the Stanford University nursery school. They found that a significant percentage of their subjects would copy what they had seen if the appropriate tools were available in applying "aggression" to

inanimate objects. The experiment did not reveal whether these subjects would have engaged in personal violence had they had the opportunity to do so.

Clearly, the thousands of hours of exposure to television experienced by the average maturing brain must be reflected in its final structure. However, if television were the sole determinant of violent behavior, it would be difficult to explain the disparity in aggravated assault rates (almost 8 to 1) between Boston and Montreal, since these cities are both saturated with the same and similar television programs. This does not mean that there is no relationship between television violence and actual violence; it simply means that such a relationship cannot be defined explicitly at present.

The obvious importance and social significance of group violence may be obscured by the difficulties in critically analyzing this phenomenon. Wars are the most devastating sort of group violence, since they produce the greatest number of deaths and injuries and the most widespread destruction of property. In an army composed largely of draftees, focal brain disease probably poses an infrequent problem—except among those who lose control of themselves under the stress of battle and kill their own comrades or innocent civilians. Revolts and riots provide an interesting borderline area of study. The anatomy of the urban riot has been lucidly dissected by Spiegel (1968).

One outstanding feature of the widespread urban riots that swept through the United States in the 1960s and early 1970s was the relatively small amount of personal violence committed, compared to the large number of people involved. In the Watts community of 330,000 inhabitants, there were about 10,000 rioters; 37 were killed, and 118 were wounded by gunfire. Police and National Guard troops caused many of these casualties; some people died when they were unwittingly left behind in burning buildings. It is our opinion that any riot atmosphere represents a powerful environmental influence on all those involved in the riot. The fact that so few were killed or injured in these riots makes us believe that strong control mechanisms were operating both in the individual rioters and in the police and National Guard troops who faced them. It would be particularly interesting if those individuals who did cause serious injury or death could be examined in detail—be they rioters or police or National Guardsmen.

It is important to keep in mind that each individual tak-

ing part in a riot has a unique life experience stored in his brain. Furthermore, each individual receives unique visual, auditory, cutaneous, olfactory, and gustatory cues, which are transmitted to his brain for the integration and synthesis that result in the vocalizations and muscular movements of human behavior. That this behavior may blend into the group activity is a tribute to the flexibility and adaptability of the central nervous system. Admittedly, a group exerts a tremendous homogenizing influence on any individual taking part in group activity. Nevertheless, the individual's brain has not ceased to function, and he is responsible for his own behavior.

Cloward and Ohlin (1960), as well as Wolfgang and Ferracuti (1967), contend that the form of social violence is determined by a subcultural normative system. They suggest that a predisposition to violence is transmitted by childraising practices and peer-group relationships in certain segments of the population; their focus is on the urban male in lower socioeconomic groups. Yablonsky (1960) and others have studied the violent behavior of juvenile urban groups. In some ways, these gangs epitomize certain urban subcultures, but it is difficult to estimate the contribution of juvenile gangs to the total picture of violent behavior. In any event, although different subcultural norms for acceptable expressions of emotion account for much of the diversity in our pluralistic society, we would predict that within a given subculture those individuals most likely to commit personal violence are those with poor impulse control.

The subculture theories have been criticized by Endleman (1968, p. 26):

Research and theory which assume that the subculture of the poor generates violent behavior reflect on the subculture bias of the behavioral scientist who is developing the theory. The middle-class-oriented behavioral scientist abhors racial theories. As a result, he generally tends to shun theories based on physiology. Having convinced himself that he has successfully removed all vestiges of racism from his formulations, the theorist retains his prejudices, imputing characteristics to a population he does not fully understand while denying that these characteristics exist within his own group. Some criminologists are coming to the

conclusion that the case for subcultural violence is overstated.

One might summarize the sociological approaches by saying that social disintegration, frustrations and aggressions, and the subcultural norms of violence all play a part in generating violent behavior. There seems, however, to be no general agreement among sociologists or cultural anthropologists on the relative importance of these mechanisms; nor have these theories led, as yet, to definitive programs that have reduced the incidence of the violent behavior in our society.

The increase in both individual and group violence has brought two kinds of response from an afflicted society. One approach to the control of violence concentrates on rigid enforcement of "law and order"—a phrase that has often been a euphemism for the suppression of public demonstrations and protests, invoking the specter of an authoritarian police state. The other approach calls for the dissolution of the slums, the abolition of poverty, and the correction of social injustices—all vitally necessary goals. Up to this time, neither of these two approaches in their piecemeal application has resulted in an effective reduction in violent behavior. But both approaches have one thing in common: they ignore the individual and his brain.

### Critics of Sociobiological Theory

*Criticisms by Social Scientists and Neurologists.* Elliot Valenstein is one of the more vocal apologists for the theory of the social causation of violent behavior and a persistent critic of the sociobiological theory of violence. He has suggested (1976) that our book, *Violence and the Brain* (Mark and Ervin, 1970), contains perfunctory concessions to environmental factors and that these concessions are more than counterbalanced by statements criticizing or denying the role of environmental factors in the occurrence of violence. However, he fails to grasp the significance of the sociobiological theory of violence. It does not de-emphasize social factors or exaggerate biological factors. Instead, it predicates a synthesis of both factors in each act of violence. There is no question that environmental, cultural, and sociological factors may predominate in many cases of violent behavior, but such factors do not act alone. Environment is always incorporated into the brain (memory); and to separate the brain from the environment is to revert to the ancient theory of



dualism, which has been inadequate in explaining human behavior and ineffective in the search for solutions to the problems of abnormal behavior.

Valenstein implies that there is substantial evidence that people from one walk of life are more inclined to violence than those in other segments of society. He is referring here to individuals in the ghettos. Indeed, his colleague Chorover (1973) has accused me and my colleagues of racism (because of his erroneous notion that we regard abnormal behavior as being largely restricted to individuals who participate in ghetto riots). We contend, however, that the advocates of the social causation of violence are more predisposed toward racist theories (in the guise of social factors) than are the advocates of the sociobiological theory of violence. The theory that some violence is related to brain disease would not cause us to look for such disease more searchingly in black ghettos than anywhere else. In contrast, the theory that personal violence is exclusively social in origin might well direct our attention to black ghettos, because that is where we see some of the worst social conditions in America. The social theory is of limited applicability, whereas the theory that violence is a sociobiological phenomenon leads us to look for brain disorders in every segment of the population. Moreover, empirical evidence suggests that individual acts of violence occur much more commonly among whites in this country than is generally recognized. Consider the many thousands of people injured or killed in domestic quarrels or by automobiles; many of these victims are not only white but also from the middle and upper socioeconomic classes. Often such tragedies are related to severe brain poisoning with alcohol. Our social and legal apparatus considers such violence to be in a different category from that of the ghetto. Yet, in reality, the fruits of violence are the same in the ghetto as in the suburbs; only the style is different.

The theories of the social scientists have a serious flaw: they define violence only in social terms. Violence is said to occur when someone is beaten, raped, or killed in the ghetto, but not when a well-to-do suburbanite becomes intoxicated and rams his car head-on into another car. The social scientists are looking at violence in terms of social causes and consequences rather than in terms of biological effects. As a physician in the emergency room and hospital clinic, I have witnessed the results of violence in both lower- and upper-class neighborhoods; although ghetto violence may be reported more often and may be

more visible as it spills out from overcrowded tenements into the streets, the color of violence from the physician's perspective is claret, not black or white; and violence is present among the affluent as well as the poor.

In addition to our social scientist critics, some neurologists are skeptical of any direct relation between abnormal aggressivity and brain disease. Their skepticism has been expressed in this statement: "Epilepsy appears to be a rare 'cause' for violent and aggressive behavior. Though there is some difference in the reported association between temporal lobe epilepsy and violent behavior, most neurologists believe that the relationship is equal to or only slightly higher than in the nonepileptic population" (Goldstein, 1974, p. 32).

There is reason to believe that this statement largely reflects the views of Ernst Rodin (1973), who has suggested that temporal lobe seizures are not associated with aggressive or destructive behavior. He recorded epileptic seizures in 150 patients; 42 had ictal psychomotor automatisms, and 15 had post-ictal psychomotor attacks. He found no instance of ictal or postictal aggression in this study. However, he states: "When there was danger of aggressive behavior, it could promptly be averted by abandoning restraint efforts" (p. 210). He also quotes Gloor's (1967) statement that temporal lobe stimulation with inlying electrodes did not produce aggressive or violent behavior in epileptic patients.

There are several answers to neurological critics such as Rodin. First of all, he does not discuss the role of anticonvulsants in modifying the abnormal behavior of epileptic patients. Dilantin, for example, has been shown by a double-blind controlled study to have such an effect in a nonepileptic population (Stephens and Shaffer, 1973). Furthermore, although fifty-seven patients in Rodin's study were photographed during psychomotor attacks without signs of aggressive behavior, these attacks were induced in every instance by the administration of bemegride. The relation of artificially produced seizures to the natural (and particularly the behavioral) components of temporal lobe convulsions is uncertain. Indeed, Rodin apparently recognized this flaw in his argument, since he attempted to buttress his thesis by introducing unsupported anecdotal accounts of naturally occurring temporal lobe epileptic seizures.

Rodin's report implies that human behavior is either environmentally generated or neurologically produced. It attempts the impossible task of separating the environment from the

reacting brain, ignoring the fact that behavior is always the result of environment-brain interaction and that behavior reflects normal or abnormal brain function only in relation to the circumstances in which it occurs (Mark and Ordia, 1976). Indeed, it is quite possible, even for an individual who is repeatedly violent during epileptic seizures, to construct an environment that inhibits aggressive or violent behavior. Such a condition often prevails in the clinical EEG laboratory or neurosurgical operating room. Even here, however, Heath, Monroe, and Mickle (1955) have succeeded in provoking rage attacks or abnormal aggressivity from electric stimulation in the limbic system of the human brain. My colleagues and I, using a Delgado "stimociever" to record and stimulate from intratemporal electrodes in a patient with temporal lobe epilepsy, were able to initiate violent behavior as part of a seizure pattern following amygdaloid stimulation (Mark and others, 1969). This was accomplished when the patient was moving freely in a ward setting. (See Figure 1.)

In another study, Rodin (1976) found *statistically significant differences* between patients with temporal lobe seizures and those with other seizure types (when the variables of age, sex, and IQ were controlled for). These differences resided in the areas of etiology, treatment response, *behavioral changes*, and especially in the fact that 71 percent of the temporal lobe epileptics were afflicted with more than one seizure type. Rodin notes that the behavioral changes were seen mostly in those temporal lobe epileptics who suffered from more than one seizure type, while there were no statistically significant differences in this regard when only one seizure type was present.

In this report Rodin does not specify the behavioral problems seen in his patients, but in a subsequent paper (1977, p. 80) he states: "The most common types of psychiatric disturbances were personality problems, *aggressive and destructive behavior*, as well as sociopathic behavior in that order" (emphasis added). In his view, other investigators failed to find differences between temporal lobe epileptics and other epileptics, as far as abnormal behavior was concerned, because they did not note whether their patients were having more than one kind of seizure.

Stevens (1966) has published a study indicating that the incidence of psychiatric disturbance in temporal lobe epileptics is no higher than in a population of patients with grand mal seizures. However, patients with grand mal seizures have a high

incidence of lesions in the medial anterior temporal lobe, and Falconer and his colleagues (1958) have shown that the amygdala and surrounding hippocampus have the lowest threshold during electrical stimulation for the production of seizures. It appears likely that many patients with grand mal seizures have their initial focus in the medial anterior temporal lobe, so that the behavioral consequences of this may be similar to those in patients with more restricted temporal lobe seizures. In his review of Stevens' report, Geschwind (1975) has shown that it contains evidence suggesting a significant relation between the occurrence of psychiatric disorders and temporal lobe seizures. *Criticisms by the Antipsychiatry Movement.* The antipsychiatry movement includes some psychiatrists and psychologists, as well as social activists, political and religious workers, and even mental patients. They attack the sociobiological theory of violent behavior as "psychosurgery." Furthermore, they claim that neurosurgical intervention for the treatment of brain disease in abnormally aggressive patients is always a form of psychosurgery.

The term *psychosurgery* has had several definitions. Brown, Wienckowski, and Bivens (1973, p. 249) define it as "a surgical removal or destruction of brain tissue or the cutting of brain tissue to disconnect one part of the brain from another, with the intent of altering behavior, even though there may be no direct evidence of structural disease or damage in the brain." Andy (1973, p. 249) describes it as "a term which has been loosely used to identify brain operations performed for the treatment of behavioral and related neurologic disorders." Breggin (1975, p. 353) states: "Psychosurgery is any surgery which mutilates or destroys brain tissue to control the emotions or behavior without treating a known brain disease. . . . In 99 per cent of the cases, the brain surgery will actually attack normal tissue. In a few cases, some brain disease will be present, but in these instances, the brain disease will have nothing in particular to do with the symptoms which the surgery is attacking."

Oregon law (specifically, Senate Bill 298 of 1973) defines psychosurgery as "any operation designed to irreversibly lesion or destroy brain tissue for the primary purpose of altering thoughts, emotions, or behavior of a human being. Psychosurgery does not include procedures which may irreversibly lesion or destroy brain tissues when undertaken to cure well-defined diseases such as brain tumor, epileptic foci, and certain chronic pain syndromes." This definition is not satisfactory, but

it attempts to distinguish between patients with emotional or behavioral disorders who have recognized structural or functional brain abnormalities and those patients who do not have brain abnormalities. This distinction has pragmatic importance because surgery in the first group is directed toward isolating or removing abnormal tissue or foci of abnormal electric discharges; it is primarily directed toward reversing brain pathophysiology—not toward altering behavior. With this in mind, it is interesting to note that Breggin, a former student of Thomas Szasz and now a spokesman for the antipsychosurgical wing of the antipsychiatry movement, tries to separate diseased brain tissue from abnormal behavior. His definition of the term *psychosurgery* is really an effort to discredit this relationship. This attempt is not surprising, since the clinical evidence for an intimate connection between brain dysfunction and behavior abnormality contradicts the basic premise of the antipsychiatry-antipsychosurgical movement, the members of which believe that human behavior is molded exclusively by the sociopolitical environment.

Breggin's attack on the sociobiological theory of violence has been directed particularly against the relation of abnormal aggressivity to epilepsy and to brain tissue abnormality. It might be well to mention more of the evidence in support of this relationship. (This evidence is presented in a review of the literature by Mark and Sweet, 1974.)

Up to 1973, Falconer had performed temporal lobectomy in approximately 250 epileptic patients, in whom abnormal aggression was reported to be a frequent symptom. Pathological findings in the resected tissue specimens, which included the hippocampus and amygdala, were as follows: mesial temporal sclerosis in nearly 50 percent, hamartomas in nearly 25 percent, miscellaneous lesions such as scars and infarcts in about 10 percent, and nonspecific lesions in the remainder. One hundred of these patients were followed from six to twenty years and evaluated by psychiatrists who were independent of the neurosurgical service. Twenty-seven of the patients were abnormally aggressive. Thirteen of these twenty-seven had mesial temporal sclerosis, and seven of the thirteen had their aggressivity relieved by the operation. The remaining fourteen had hamartomas and other lesions, and three of these patients had their aggressivity relieved by the operation.

Walker (1973) has reported on fifty epileptic patients with inlying electrodes in the temporal lobe. Recordings from

prospered because some psychiatrists have labeled patients erroneously and without sufficient evidence to validate their diagnoses (Akiskal and McKinney, 1973; Rosenhan, 1973). The exploitation of this regrettable fault has led some antipsychiatrists to abandon efforts toward the proper diagnosis of their own patients. Since the symptoms of treatable brain disease may mimic primary psychiatric illness, this practice of nondiagnosis can lead to tragic results. Thus, Malamud (1967) reported on eighteen patients in a psychiatric hospital who were originally diagnosed as having "functional" illnesses and subsequently died; autopsy in each case revealed a tumor of the limbic brain.

I have recently seen a patient with a cerebellar tumor who was similarly misdiagnosed in the clinic of an outspoken antipsychosurgical psychiatrist. His prohibitions against neurological surgery apparently influenced his resident staff to avoid doing even a limited neurological examination. The fundi of the 21-year-old patient with advanced papilledema were not examined by the psychiatric resident who saw him two days before he was admitted to our hospital in a moribund condition with a cerebellar pressure cone. Instead, the resident told the patient that his headaches, nausea, and vomiting were caused by a hatred of his mother and a lack of regard for his father.

The antipsychiatry campaigners have been in the vanguard of those who would precipitously dismantle mental hospitals and discharge their patients into an unprepared community. Szasz (1961, 1970) has repeatedly condemned institutional psychiatry, and he and his cohorts have been inordinately successful in influencing mental health planners. Reich (1973) has termed this nontreatment of the mentally ill a "national disgrace." The antipsychiatrists justify their stand against diagnosis, psychiatric hospitalization, and especially brain surgery by claiming that these medical tools destroy a patient's freedom of choice; in their view, freedom always takes precedence over any other controlling factor in human existence (Szasz, 1963). This misleading argument has been answered by Reich (1973, p. 912) with regard to hospitalization:

Freedom to be sick, helpless, and isolated is not freedom. The claim that if there were more formal outpatient psychiatric services, all the mentally ill could effectively manage on their own is faulty. No amount of outpatient service makes the

slightest difference to the patient who is too disturbed to travel to where these services may be offered. Despite all our therapeutic zeal there are many forms of mental illness that are progressive and do not quickly respond to any treatment. These chronic patients deserve at least as much care as we offer to the acutely ill who improve quickly. Our present policy of discharging helpless human beings to a hostile community is immoral and inhumane. It is a return to the Middle Ages, when the mentally ill roamed the streets and little boys threw rocks at them.

British psychiatric services were the first to discharge large numbers of mental hospital patients into communities. However, the consequences of this action were so disappointing that this policy has been largely reversed (*New York Times*, Aug. 20, 1974, p. C-23). A similar program in the state of New York created so many problems that the legislature was forced to take official action to limit the licenses of nursing homes and hotels that were receiving these patients (*New York Times*, Aug. 14, 1974, p. 1). The attorney general of Massachusetts castigated the program in his state, citing tragedies involving patients and the communities (*Boston Herald American*, Aug. 30, 1974, pp. 1, 9). Similar experiences are common in other parts of the country. Thus, the application of an antipsychiatric concept has in practice proved to be very unsatisfactory.

Sir Martin Roth, former president of the Royal College of Psychiatry, has captured the spirit of the antipsychiatry movement in this statement:

When the whole repertoire of criticisms and recommendations of antipsychiatry are analysed, we find moral condemnation in place of scientific search for causes; social determinism in place of unbiased evaluation of the relative contributions made by biological, experiential, familial, and social factors . . . prejudicial denunciation . . . and dogmatic assertions. . . . The self-righteous conviction, [the] aggressive and denunciatory tone, and the extravagant language used by some critical colleagues represent a new phenomenon on the social scene. Constructive endeavour to resolve the mani-

fold problems of contemporary psychiatry requires attitudes of a different kind [Roth, 1973, p. 373].

The antipsychiatric theory that violence, abnormal behavior, and mental illness are exclusively sociopolitical in origin remains unsubstantiated. Robert Wilson, a social scientist who has worked in the field of mental health, has stated after a thorough review of the world literature: "Our faith in an essentially social etiology of psychological disorder has been shaken by the paucity of clearly demonstrable causal patterns" (Wilson, 1973, p. 85). There has never been a society or culture that was without violence or mental illness. From the communist countries, where political psychiatry is a fine art, to Nazi Germany, where mental patients were often killed, mental illness and abnormally aggressive behavior have always remained a persistent phenomenon, just as in democratic countries.

In summary, the criticism by the antipsychiatrists that the sociobiological theory of violence advocates indiscriminate use of "psychosurgery" is invidious. It is a tactic designed to deflect the focus of scientific investigation away from the anachronistic theories that form the basis of the antipsychiatry movement, as well as to prevent investigations that would assist otherwise untreatable patients and substantiate the sociobiological theory.

The keystone of the antipsychiatry movement is the idea that the human brain is a *tabula rasa*, responding in a completely passive manner to the sociopolitical environment. This approach—a variation of the theme propounded by John Locke, the seventeenth-century political philosopher—has enjoyed a recent renewal in the sphere of social science. Physiological observations and other substantial evidence reported in this chapter render the *tabula rasa* theory untenable. This evidence contradicts the basic tenets of the antipsychiatrists and has provoked their unrestrained hostility. The antipsychiatrists, however, have failed to advance scientifically valid arguments either for their own theories or against the sociobiological theory of violence. Most of the antipsychiatrists are not board-certified in clinical neurology or neurosurgery, and their lack of information about the human brain, coupled with the unfortunate results of their campaign against the diagnosis and treatment of mentally ill patients, disqualifies them as credible critics.



### Conclusion

The problem that modern biological and social scientists face in trying to deal with violence is much like the problem that nineteenth-century neurologists and psychiatrists had with what was then called insanity: learning enough about its causes and natural history to be able to assess individual cases and treat each patient properly. In the nineteenth century the insane asylums were full of people lumped together as "crazy" but who in reality had many different diseases. Some actually had pellagra. Once doctors could recognize vitamin deficiencies and learn how to treat and prevent them, the pellagra-related symptoms of mental illness began to disappear. Other patients were suffering from the late stages of syphilis or from undiscovered brain tumors; when those diseases became accessible to diagnosis and treatment, the "crazy" category began to shrink still further. In short, the more that psychiatrists and neurologists learned about the various causes of "insanity," the more capable they became in differentiating between mental conditions that appear to be the same but, because they have different causes, require very different methods of treatment.

We are in the same state today vis-à-vis violence. We need to find out more about it and its various causes, so that we can identify the most important biological and/or social factors affecting each individual and then treat each patient appropriately. This goal calls for a team effort, and the team should include not only brain scientists and clinicians but also social scientists, criminologists, cytogeneticists, public health specialists, legal experts, ethicists and philosophers, and an ombudsman for the violent individual.

Our previous criticism of sociologists studying group behavior does not mean that there is not a significant role for such workers in the problem of violence. While the sociobiological theory of violence concentrates on individuals, it is obvious that individuals function within the framework of the prevailing modes in society. As long as senseless killings and brutality are excused or condoned in our communities and on our highways, the identification of any violent individual as unique will continue to be very difficult. How, in fact, can society even define what is abnormal under these circumstances? Only when our society—through its educational, religious, family, and governmental structures—clearly defines violence, and reacts uniformly

to violence as being unacceptable, shall we be able to approach the situation in a truly rational way.

The definition of "unacceptable violence" is, of course, a major stumbling block. What is unacceptable violence? To the "law and order" faction of our society, any liberal group's protest might fall into this category, while protest or activist groups might label any action of police against demonstrators as "police brutality" and a clear-cut case of unacceptable violence. Obviously, any definition of unacceptable violence, no matter how carefully articulated, will be construed according to the judgment of the people participating in or observing a given violent action. But I would agree with Howard Mumford Jones (1969, p. 39), who states in his monograph *Violence and Reason*: "The celebration of violence either as an end in itself or as a short-cut to political or social change can only end, unless all history is in error, in the disruption of order and culture."

I would define "acceptable violence" as the controlled minimum action necessary to prevent personal physical injury or wanton destruction of property. This definition would apply equally to police and public authorities as well as to activist groups and minorities. Violent acts that do not fit into this category would be "unacceptable." I present this definition more as an example than as dogma. There might be better definitions that could be more readily applicable. The important thing, however, is for such a definition to be formulated and publicized, and earn its acceptance; for this is a first step in the orderly and systematic process that must be used in our society if we are to find a method of recognizing potentially violent individuals and discerning the sociobiological factors that contribute to their abnormal aggressivity.

Violence is a public health problem, and the major thrust of any program dealing with violence must be toward its prevention—a goal that will make a better and safer world for us all.

## *Part II*



The incidence of murder is increasing rapidly in our society. In New York City alone, over twenty murders are committed each week, although only a few of them—those with a bizarre or “glamorous” aspect to them—are reported in the media. Headlines such as the following are seen: (1) “MASS STRANGLER CAUGHT—PROFESSIONALS DEBATE INSANITY”; (2) “TOWER KILLER SLAYS TEN STUDENTS”; (3) “SON GOES BERSERK AND KILLS FAMILY”; (4) “THREE WOMEN ROB BANK—TELLER SLAIN”; (5) “COMMISSION FINDS ASSASSIN ACTED ALONE”; and (6) “BOMBINGS INCREASE AS PEACE TALKS CONTINUE.” The six chapters in this section cover the types of homicides inherent in each of these headlines.

The section begins with the evaluation, classification, and

# *Murder*



prediction of homicide. Eugene Revitch and Louis B. Schlesinger discuss the psychiatric and psychological evaluation of murderers and present a classification system that can be applied to all antisocial and criminal behavior. Their system is based on the motivational stimuli of the crime, and they provide rich case material to illustrate each of their points. This classification system lends itself to prediction of future acts and can also be an aid in helping to decide among the various dispositional alternatives.

One of the classic concepts in forensic psychiatry has been Fredric Wertham's description of the catathymic crisis, originally developed in 1937. In Chapter Seven, Wertham, a pioneer in the psychiatric study of crime, restates his position. He explains the psychodynamic process leading to overt acts of

violence and breaks it down into specific stages, thereby considering the process a "clinical entity." He includes a detailed case study and some ideas concerning treatment and prognosis.

Jane and Glen Duncan deal with the intriguing topic of intrafamilial murder. In their view, murder in the family occurs when two family members are locked into a continuous emotional interaction, from which there seems no possibility of escape except through an act of violence. That is, the perpetrator sees a violent solution as the only viable alternative to resolving the mounting crisis. The authors discuss family dynamics and therapeutic issues in the context of individual and family psychopathology.

There is a dearth of research concerning female criminals and feminine criminality, including the specific topic of women who commit homicide. Yet statistics show that, in very recent years, female crime in general and female homicide in particular have been steadily increasing. In Chapter Nine, Alan Blum and Gary Fisher review several key studies on the topic and then go on to present their own view of the problem. They highlight the impact of the new feminist movement and "sexist" attitudes toward female murderers and discuss the implications.

Political assassination has been around since the time of Julius Caesar and was even more prevalent prior to the Roman era. The assassinations of John F. Kennedy, Martin Luther King, and Robert Kennedy, to name a few, indicate that the problem is with us today more than ever. Recently, especially after the assassination of John Kennedy, scientists began to take a look at what makes up a political assassin, in order to try to develop methods of detection, intervention, and prevention. In Chapter Ten, Irving D. Harris examines several well-known assassins by way of psychohistory and attempts to draw a typical psychological profile. Many traits and background histories of the assassins studied have a striking similarity. Dr. Harris develops a concept of the "rebellious-rivalrous personality" (often seen in younger sons in relation to their older brothers), which may predispose one to be a political assassin given the appropriate context and precipitating factors.

Homicide is, of course, a criminal act punishable by law. The title of Chapter Eleven, then ("Legal Homicide and Its Consequences"), might initially appear puzzling. Here, Dane Archer and Rosemary Gartner examine socially sanctioned killing, particularly killing during war. Somehow we tend to ignore violence when it falls under a politically sanctioned umbrella. It is,

however, a form of homicide, and it gets an interesting sociological analysis from the authors. Specifically, they show the effects of legal homicide (during wartime) on the subsequent incidence of illegal crimes of violence.

# Murder: Evaluation, Classification, and Prediction

*Eugene Revitch*  
*Louis B. Schlesinger*



The psychiatric evaluation of offenders is mostly requested for determination of sanity and the ability to stand trial. The stress on responsibility and competency at the expense of the solution of dispositional and predictive problems has been mentioned by Sadoff (1975). Our purpose is to describe some of the techniques of psychiatric and psychological evaluation of homicide, with an emphasis on classification and dynamics of the act for prognostic and dispositional purposes.

The psychiatric and psychological evaluation should emphasize the offense itself within the context of the individual's personality organization, value system, and ability to empathize. Except for the offenses stimulated by paranoid delusions and hallucinations and for the very rare acts of violence committed in states of confusion due to organic or toxic factors and

ictal and postictal epileptic states, the psychiatric diagnosis does not explain the offense. Therefore, the examiner must familiarize himself with the individual's background history and particularly with the details of the criminal act—as presented by the law enforcement agencies and the legal profession and by the individual's own account of the events leading to the offense. In spite of rationalization, circumstantiality, outright denial of the crime, and a tendency to manipulate the examiner in some cases, most offenders—particularly in cases of bizarre and pathological homicide—speak openly and give various details of the offense, even to their own possible disadvantage. Perhaps this openness results from a need for appreciation, relief, confession, or self-justification (Murphy, 1958); or perhaps, as we believe, it has a cathartic effect. In contrast, offenders with paranoid and sociopathic features, or those with direct orders from their attorney, are resistant to the examination. Still others will not resist the interview but will refuse to complete the psychological tests because they feel threatened by the fear of failure, humiliation, or confrontation with self.

Since the full knowledge of the criminal act is important in the evaluation, the offender's guilt is of prime importance. Incrimination by witnesses (Buckhout, 1974), polygraph findings (Lykken, 1974; Smith, 1967), and even admission of guilt (Ley and Versele, 1951) are not always reliable. In a case cited by MacDonald (1961), thirty persons falsely confessed to the murder of a young woman whose nude body had been cut in half at the waist and mutilated with twenty stab wounds. MacDonald also refers to a 1911 case—a man who falsely confessed to a crime because he viewed imprisonment as a protection against lynching. Ley and Versele (1951) report the case of a man who made a false confession of murder because of reproachful looks of the villagers present at the time of the interrogation. Even when the offender did commit the crime, the psychiatric examination may reveal irrational motives. Freud (1915b) and many of his followers claim that a large group of criminals commit crimes in order to be punished because of unconscious guilt. Although occasionally an offender may attempt to simulate insanity to avoid punishment, a bona fide psychotic may also simulate a psychosis to convince himself that he is a performer and not a sufferer of mental illness (Schneck, 1970). In contrast, offenders who have committed ego-dystonic irrational murders may claim a rational reason, such as robbery (Ruotolo, 1968). Revitch (1957) reports a



40-year-old man who claimed robbery as a motive when he attacked a woman with a blackjack just for the purpose of tying her legs.

The psychiatric interviewer sometimes uses narcoanalysis to help him gain full knowledge of the criminal act. Narcoanalysis (that is, interview under the influence of intravenously injected sodium amytal or sodium pentothal) originated in the early 1930s. (We prefer sodium amytal, since spasm of the glottis may complicate sodium pentothal injection.) The narcoanalytic interview is not a mechanical procedure, however; and the examiner still must establish rapport with the examinee. Weinstein and Malitz (1954) suggest that what is considered a release of inhibition during narcoanalysis is largely a manifestation of the examiner-examinee relationship. In our opinion, narcoanalysis is seldom helpful in obtaining confessions or finding out the "truth," since fantasies rather than real events may be elicited, or the examinee may remain unproductive or even silent. It may be useful in recovering memory of the act in case of amnesia (MacDonald, 1961)—although Varma and Jha (1966) succeeded in recovering memory with narcoanalysis in only two cases of amnesia out of eighteen. Thus, the main value of narcoanalysis in criminology is the discovery of suppressed feelings, attitudes, and goals. Another procedure used by some interviewers is hypnosis. Meyerson (1966) successfully used hypnosis with two mothers who had killed their children but had no memory of their act; under hypnosis they reproduced the offense in great detail. Most of the time, however, the examiner has to rely on a painstaking, patient, skillful, and unhurried interview.

Request for electroencephalographic (EEG) examination is common in sudden unprovoked murders and when epilepsy is suspected. The father of electroencephalography, Hans Berger, hoped to use the method for diagnosis of psychiatric illness. However, it soon became apparent that its chief value was not in psychiatric diagnosis but in the diagnosis of epilepsy and brain lesions. Yet, over the years, examiners have continued to search for electroencephalographic correlates of psychiatric conditions, with variable and conflicting results (Ellingson, 1954; Hanretta, 1965). In the search for EEG correlates of crime the same uncertainty remains, although positive correlations have been reported by some authors (Assael and Kohn Raz, 1967; Jones, Bagchi, and Waggoner, 1955; Silverman, 1943, 1944; Verdeaux and Verdeaux, 1955; Winkler and Train, 1959). A

few examiners have dealt specifically with the EEG correlates of homicide. Sayed, Lewis, and Brittain (1969) found four times more abnormalities in cases of homicide than in controls, while Hill and Pond (1952) found more abnormalities in psychotic and motiveless murders than in incidental or clearly motivated homicides. The most talked-about finding allegedly connected with aggressiveness and homicide was the 6- and 14-per-second positive spikes in the temporal area (Gibbs and Gibbs, 1951). This pattern—which, in Gibbs' opinion, is a correlate of thalamic and hypothalamic epilepsy—is usually found in adolescents during sleep. Henry (1963) denies the epileptic nature of 6- and 14-per-second positive spikes, but he feels that the pattern may indicate a neurophysiological handicap, "the importance of which varies as a function of the environment of the patient" (p. 327). Schwade and Otto (1953) and Schwade and Geiger (1953) report two adolescents with a 6- and 14-per-second positive spike pattern who committed sudden seemingly unprovoked murders. However, a review of their cases clearly indicates that psychodynamic factors led to the offenses. A review of the literature indicates that there is no one-to-one relationship between EEG findings and psychiatric conditions or criminal activities. The relationship is either statistical or inferential. The findings usually consist of bioelectrical immaturities, such as slow alpha and theta activity, although distinct abnormalities are also reported.

There is little question that psychological testing has contributed substantially to the understanding of psychopathology and personality dynamics. Consequently, psychological tests should have great relevance in the understanding of homicide. Very little, however, has been published in the area. Review of the literature shows approximately fifteen papers on psychological testing and homicide, with the same major flaw running through most; that is, since they do not provide information on the specific nature of the homicidal act, the reader does not know what type of homicide the results apply to. A brief review of several of these studies is warranted, since this literature is relatively unknown and does represent an initial inquiry into this field.

Lester and his colleagues have published a series of brief reports studying "convicted murderers" and their Rorschach protocols. Specifically, they have studied movement responses (Lester and Perdue, 1973), color-shading responses (Lester and Perdue, 1972), external restraints (Lester, 1973a), body image

(Lester and Perdue, 1974), family murder (Perdue and Lester, 1973), murderers in comparison with suicides (Lester, Kendra, and Perdue, 1974), and prediction of murder (Lester and others, 1975). These researches have been basically statistical, with no presentation of raw data or clinical case histories. While all these findings are interesting, they need to be integrated, classified, and replicated before they can fully contribute to the understanding of the psychopathology of homicide.

Kahn (1967) found that Rorschach "reality adherence" (that is, reality testing as depicted by the form quality of responses [see Mayman, 1964]) correlated significantly with judgments of legal insanity. While this finding is certainly noteworthy, it sheds more light on the Rorschach as a means of depicting reality testing than it does on the understanding of murder. Likewise, Deiker's (1973) study—in which he found that Wechsler Adult Intelligence Scale characteristics did not differ significantly among murderers and the Wechsler standardization sample—does not help us understand the specific intellectual, cognitive, and thinking processes of those who murder.

Two studies—one by Satten, Menninger, and Mayman (1960); the other by Miller and Looney (1974)—come closest to providing what is really essential to an understanding of the value of psychological testing as it pertains to murderers. These studies provide case history material along with raw data from the protocols; thus, the reader can gain an understanding of the dynamics of the homicide. In the Satten study, of "murder without apparent motive," the Rorschach records were found to be "brief and constricted" (p. 51), with a noticeable disturbance in dealing with color. The patients had difficulty in keeping boundaries between fantasy and reality clear and separate; and one patient, when shown the Rorschach card, "began to describe not only the blot in front of him but a confused mixture of dreams, memories, and waking fantasies" (p. 51). The Thematic Apperception Test (TAT) stories of these patients were very brief and were "filled with a quality of primitive, murderous hostility" (p. 50) and violent, primitive fantasy life. Themes often centered on homicide, whereby the murderer was "provoked" into committing the act; and the stories were told without accompanying affect. Significantly, the patients almost always denied conscious fantasy or ideas of murder; it was only through testing that these ideas emerged.

Miller and Looney, who studied Rorschach protocols for murderers who "dehumanize," found, among other things, that

"humans are not seen as people. There is a paucity of images that would suggest a stance that other people are full, warm, and alive. Similarly, Thematic Apperception Test stories indicate that other people are not seen as humans, and often there is obvious confusion about whether a figure is alive or dead. . . . The distinction between life and death seems to be quite unclear. . . . There appears to be no sense of human death; people who are perceived as alive are god-like and immortal" (p. 191).

A distinction needs to be made between personality structure and personality dynamics as revealed by the psychological tests. An in-depth picture of ego strength, ego supports, personality balance, and inner cohesiveness is essential, and the Rorschach is an excellent tool for this. The arrangement of the psychogram and the ratios of the various scoring categories point out the underlying structural makeup. For example, the Rorschach psychogram of acute catathymic murderers consistently reveals a tall brittle F (form) column with little support and little intrapsychic or emotional stimulation. Such an individual has an overcontrolled, rigid, inflexible ego and is prone to sudden disintegration under the right stress, which is precisely what happens in many pathological murders.

Content of the Rorschach test aids in the understanding of psychodynamics. Individuals prone to violent acting out and murder often perceive aggressive and destructive contents such as "blood," "death," "fighting," "killing," "explosions," and anatomical parts "decayed" or "torn apart." Integration of specific content with the specific stimulus pull of the various cards further clarifies the in-depth conflicts. Both the ability to empathize and the press of primitive impulses are extremely relevant findings brought out with clarity by the Rorschach.

While the importance of the Rorschach in understanding in-depth psychopathology cannot be minimized, it is often not wholly effective in elucidating the relevant surface dynamics. Such thematic projective techniques as the TAT or the Blackie stories often crystallize the patient's motivations in his own language. These data are also helpful when one is presenting material in court, since fantasy productions are often more easily understood by judge and jury than in-depth Rorschach interpretations imbued heavily with psychoanalytic theory. Personality inventories (for example, the Minnesota Multiphasic Personality Inventory) have been found to be of little diagnostic or predictive value, whereas other projective techniques (for example, figure drawings) greatly add to the psychodynamic understanding.

The fact is inescapable that many psychologists, however well trained and experienced, do not use the testing appropriately in forensic cases. The issues that confront the psychologist in daily clinical practice are actually different from those involved in understanding a murderer. Structure and dynamics must be kept separate; and the test findings must be integrated with the psychopathology of the crime, especially by the use of the thematic techniques. If this is not done, the psychological evaluation is merely an isolated academic exercise and of little help to the court or to the understanding of the case.

### Classification of Homicide

An essential first step in the understanding of homicide—or, for that matter, any aspect of nature—is an appropriate classification schema with which to organize one's observations. This has certainly been the model that psychiatry has followed since Kraepelin (1896) and to some extent since Hippocrates. The work that has been done on homicide, for the most part, proceeded with little regard for classification. The legal classification and the classification based on the relationship of the murderer to his victim (for example, parricide, matricide, infanticide, sex murder) ignore the dynamic aspects of the crime. In one study of adolescent parricide, for example, all the children were considered as a group because all of them had killed a parent (Corder and others, 1976). This is not necessarily the most significant parameter. Earlier studies, such as those of Krafft-Ebing (1886), did not focus on global classification but on bizarre and unusual cases. Bromberg (1961) divides homicide into normal and psychopathic; consequently, in the psychopathic category "thrill" murder, rape murder, alcoholic murder, and impulsive bizarre murder are all grouped together in a "kaleidoscope of psychopathy" (p. 134). Miller and Looney (1974) refer to three murder syndromes to be understood in terms of risk factor. The common denominator is the degree of dehumanization of the victim by the offender. Thus, homicides are divided into (1) high risk with total and permanent dehumanization of the victim, (2) high risk with partial and transient dehumanization, and (3) low risk with transient and partial dehumanization of the victim requiring consensual validation of the peer group. Tanay (1969) divides homicide into (1) dissociative, (2) psychotic, and (3) ego syntonic. The dissociative homicide is carried out in an altered state of consciousness

and frequently without conscious awareness of motivation. The psychotic homicide is a result of overt psychosis. Ego-syntonic homicide is committed without disruption of ego functions; is consciously acceptable to the perpetrator; and is in essence a rational, goal-directed act. Halleck's (1971) classification of crime as adaptive or nonadaptive is a broad division of antisocial behavior into normal (similar to Tanay's ego syntonic) and abnormal (similar to the dissociative and the psychotic murders, both of which should be considered ego dystonic).

Our classification of crime, including homicide, is based on motivational and dynamic aspects of the act. In rare cases, the motivation is a direct outgrowth of the neurological or psychiatric condition. In the majority of cases, the motivational factors are independent of diagnosis and form the basis for classification.

*The Organic, Toxic, and Paranoid Group.* Epilepsy stands out in the organic group, since it is commonly referred to as a possible explanation of sudden murder and its known presence in an offender may be used by the defense. Epilepsy does not predispose to murder (Lennox, 1960; Livingston, 1964; Lewis, 1975), and epileptics are not more violent than the general population. Homicide committed during an attack of psychomotor seizure or in postictal state is extremely rare (Walker, 1961). A number of other organic conditions also have been studied. Podolsky (1964) cites a few rare instances where an individual committed homicide during somnambulism and had no recollection of the event. In addition, the possible relationship between aggressive behavior and XYY chromosomes in tall males attracted the attention of investigators in the early 1960s. Two seemingly unmotivated and sudden murders by XYY males, one in Australia and another in France, brought forth the problem of criminal responsibility in such cases. The consensus at the present is that there is no one-to-one connection between aggressive crimes and XYY chromosomes. Review of the literature indicates that not all XYY males are aggressive (Boughman and Mann, 1972; Baker and others, 1970; De Bault, Johnston, and Loeffelnolz, 1972). Head trauma may cause aggressive outbursts, particularly when the temporal lobe is involved (Mark and Southgate, 1971); but this, in our experience, is a rare occurrence. Mark and Ervin (1970) found a relationship between the eruption of homicidal violence and a tumor of the limbic system; in the cases reported, the violence ceased when the tumor was removed. The mass murder by Charles Whitman (Nevin, 1966)

was, however, premeditated, and he had even warned his psychiatrist of his intent. Under the façade of pleasantness, there was a history of brutality and violence. Thus, this case could be explained on a purely psychogenic basis, with the brain tumor playing, if any, a secondary role.

Alcohol is the most common toxic agent leading to violence (Lanzkron, 1963; MacDonald, 1961). Mayfield (1976) concludes that most alcoholic murders are nonpremeditated and impulsive and chiefly involve acquaintances or family members, with many of the victims also under the influence of alcohol. In some situations, however, alcohol releases paranoid ideation or long-standing conflictual pressures, which, if not repressed, may lead to homicide. One of our cases—a man treated for anxiety with somatic manifestations, low self-esteem, and vague ideas of reference—disclosed an inability to maintain intimate relations with the opposite sex, gynocidal dreams, and incestuous fantasies. He shot his girl friend of three weeks while intoxicated. Among the other agents in the toxic category, amphetamines are statistically the most responsible for assaults and homicide (Ellinwood, 1971). Tinklenberg and his colleagues (1974), however, found secobarbital to be a leading drug in assaults and murders by adolescents. Homicide caused by paranoid delusions due to consumption of lysergic acid dyethylamide (LSD) is documented in the literature (Reich and Hepps, 1972), and we had an opportunity to observe a similar case. Fabling (1956) believes that bufotenine, found in *Amanita muscaria* mushrooms, caused the sudden attacks of fury and unprovoked murders by the Berserks in ancient Scandinavia.

The importance of paranoid delusions (particularly delusions of infidelity or morbid jealousy) in homicide has been mentioned in the literature (Lanzkron, 1961, 1963; Podolsky, 1956, 1961). Some sudden homicides or seemingly sudden homicides by nonpsychotics may be induced by fear, with paranoid elaboration of the victim's motives, in conditions of stress, tension, and uncertainty. Some of the unprovoked killings by police officers recently reported in the press may have taken place in similar conditions of fear, uncertainty, and confusion. One of us (E. R.) had an opportunity to examine such cases in the United States Disciplinary Barracks during World War II. The following case is illustrative:

*Case 1.* While serving in the India-Burma theater, a 36-year-old soldier without a criminal record shot a man

in his unit. For several months prior to the event, the victim had made threatening remarks, implying that he would kill anyone in order to be declared insane and discharged from service. The potential victim's actions frightened the offender to the point that he planned to request a transfer to another unit. In this state of mind, he noticed the victim walking with his hand in his pocket, lunging, he believed, toward him. Without taking any time for reflection, he grabbed his rifle and shot the victim.

Orenstein and Weisstein (1958) report a similar case of murder by an individual who made vain complaints to the police of threats by another person. When he noticed the victim with his hand in his pocket, he had an impression that the latter was hiding a gun and he shot him on the spot. A typical murder due to paranoid delusions is that of Daniel M'Naghten, who in 1843 attempted to assassinate Sir Robert Peel, the Tory prime minister of Great Britain, but killed Peel's secretary by mistake. M'Naghten was plagued by the delusion of being persecuted by the Tories and Jesuits (Tuke, 1967). Many of the mass murders fall into the category of paranoid homicides. Bruch (1967) cites the case of a teacher who killed eight people and wounded twelve in the German village where he had taught ten years previously. He had a delusion that people in the village knew about his masturbatory practices and therefore made fun of him. Of the eight assassins and would-be assassins of the American presidents, all but one were either overt paranoid psychotics or their thinking was tinged with gradiosity and feelings of victimization (Weisz and Taylor, 1969). Podolsky (1956) believes that the purpose of paranoid homicides is to discharge overwhelming rage when threatened by mental collapse, to create a state of omnipotence in order to cope with anxiety, and to regain homeostasis in the internal milieu. The following case is illustrative of murder as the result of paranoid psychosis:

*Case 2.* S. W. is a 26-year-old, single, unemployed male who stabbed his girl friend sixty-eight times and then left her in her bathtub to die. After the knifing, he walked out of the bathroom and told a girl who had been visiting at the time that "Diane is dead." S. W. left the apartment unhurried, went to a resort town that same night, and was apprehended the next day.



During the year preceding the murder, S. W. became increasingly psychotic. His behavior was markedly different from what it had been, and several friends urged him to consult a psychiatrist; however, he never did. A close friend reported that "many times S. would sit in the living room rambling on. He would talk about threats on his life coming from 'voices,' about the 'mob' being after him, about seeing signs that he was in danger." S. never entered his apartment through the door; instead, he climbed in a window, since he felt that he was under surveillance. A few weeks before the murder, he slept on the floor, believing that the bed springs were microphones. He became increasingly interested in witchcraft and the occult. Finally, he came to believe that his girl friend was a witch, "that she was controlling my mind through voodoo." He felt that he must kill her, and he did.

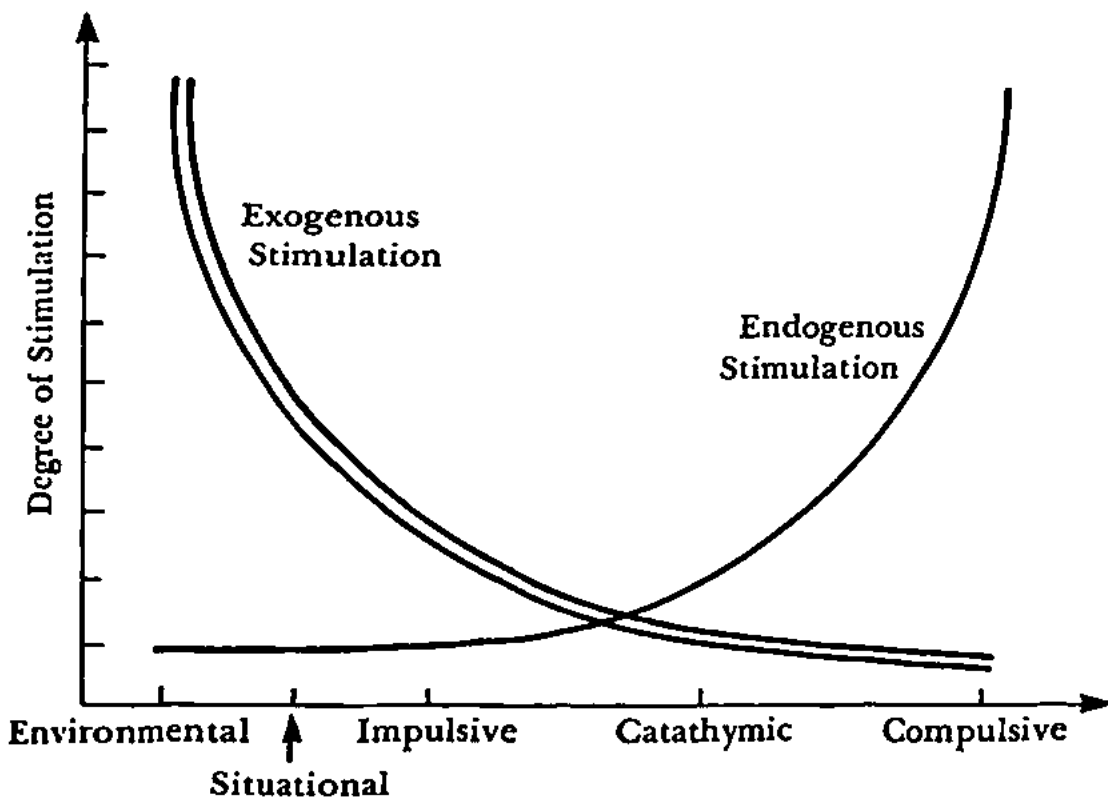
When he was examined in a county jail by one of us (L. B. S.), he was unshaven, dirty, and disheveled, and his clothing was torn. He was uncooperative, restless, and preoccupied and stared into space for long periods of time. His thinking was loose, slow, bizarre, and tangential; on numerous occasions it took him several minutes to answer a simple question. He was delusional and admitted to auditory hallucinations. He refused to discuss the exact details of the crime, stating "I can't verbalize it."

On the psychological tests he gained a full-scale Wechsler IQ of 109 (verbal, 100; performance, 120), placing him at the high end of the average range of intelligence. Several of his answers, however, were very bizarre and loose and suggestive of a formal thought disorder. Rorschach perceptions were primitive and suggestive of schizophrenia (for example, "This is blood or it could be cherry juice—this looks like a spillage"). (A review of S. W.'s first Rorschach, given ten years prior to the murder, indicated a fascinating finding. On card VII, the "mother" card, the patient perceived a "crude ax," which suggests that destructive impulses toward women were present but controlled at that time.) Psychiatric and psychological findings point up a clear case of schizophrenia, paranoid type. The paranoid delusions were the immediate stimulus to murder. On a deeper level, however, as suggested by the Rorschach responses ten years

before, conflicts generating aggressive feelings toward women were present but under control.

**Motivational Stimuli.** The "motivational stimuli" classification has been described by Revitch (1975, 1977). Evaluation of the motivational stimuli deals with the dynamics of the criminal act itself. These stimuli are spectrally distributed, with the purely exogenous on one end of the scale and the purely endogenous at the other end. From the exogenous to the endogenous end of the spectrum, the offenses are divided into (1) environmental or sociogenic, (2) situational, (3) impulsive, (4) catathymic, (5) compulsive. These categories are not intended as rigid classifications of behavior; instead, there are borderlines, with characteristics belonging to the adjoining areas. A diagrammatic representation of the motivational stimuli, and their relationship to the intensity of exogenous and endogenous factors, is presented in Figure 1. For instance, in the compulsive offenses external factors play a minimal role, while the endogenous pressures are paramount. The reverse is true for the environmental offenses.

Figure 1. Endogenous-Exogenous Motivational Stimulation



**Environmentally stimulated homicides.** The present rise of crime and violence throughout the world is obviously due to environmental influences. A combination of social pressures and

weakening of authority and controls is responsible for this phenomenon. There are many historical examples showing that weakening of social controls and the resulting social disintegration by itself will foster violence. A good recent example is the increase of crime in the civil strife of Beirut. A perfect historical example is the behavior of the demoralized and undisciplined mercenary armies during the Thirty Years' War (see Wedgwood, 1957). Political murders in general, even if they are committed by unstable individuals, have a connection with the social mood and pressures. The leadership's attitudes also influence group conduct. The moral climate of the Vietnam War undeniably had much to do with the My Lai massacre (see Gault, 1971). The atrocities under the Nazi regime were directly sponsored by the leadership, so that angry and sadistic individuals who would otherwise express their aggressive needs in fantasy life could give vent to their impulses.

The increased violence and audacity of street crime; the senseless murder of aged people; the acts of vandalism by juveniles; and the acts of modern political terrorists (the taking of hostages and the murder not only of opponents but of the uninvolved and, more recently, of children)—all these acts can be attributed not only to the personality variables of the offenders but also to the general weakening of social discipline, values, and restraints. Frequently, what may look like an adaptive or ego-syntonic murder for gain during robbery may actually be wanton killing, with the robbery just a pretext for murder by pathological individuals. Moreover, pathological individuals with a need for violence may be influenced by the social climate, which will release, direct, and give meaning to the violent act (see Revitch, 1975). One man whom we interviewed had shot a police officer, claiming racial antagonism as a cause of the act. It soon became apparent that racial problems had simply provided a direction for release of aggressive tension. Race riots preceding the act directed the aggression against the police, although this man had also toyed with the idea of shooting people on the street.

Murders committed by professional criminals for some specific and gainful purpose are not too common and rarely come to psychiatric attention. Sutherland's (1947) concept of differential association—that is, criminal behavior as learned in interaction with others—generally applies to this group. Some hired triggermen, however, are only semiprofessionals with unstable personality organization. An example is Louis Moya (see

Wyden, 1963), whose life pattern was marked by instability, poor school adjustment, poor work adjustment, and a criminal record. Whenever he was out of a reformatory or prison, he was in the company of ex-convicts. He explained his predilection for ex-convicts in the following words: "This is my group. This is a group I belong with" (p. 69). Thus, individuals with various personality organizations, regardless of the presence or absence of psychopathology, have in common environmental influences as their main stimulus to crime. The most characteristic and pure type of homicide stimulated by environmental influences is murder committed by the members of organized crime for adaptive, logical purposes as far as the needs of the organization are concerned. These cases, however, are rarely seen by psychiatrists. The case of a poorly integrated individual who committed an amateurish murder of a woman for a fee is presented as an illustration of a mainly environmentally conditioned crime.

*Case 3.* A 51-year-old married man murdered a woman by multiple stab wounds for a fee of several hundred dollars. He was hired by the victim's husband, a bar-room acquaintance, because, according to him, he was known "not to be exactly a goody-goody." After a slight hesitation, he accepted the offer because he needed the money. Originally, he tried to choke the victim, but she resisted; and so he stabbed her. Following the crime, he developed nightmares and felt tense and guilty. He then requested admission to the alcohol unit of the local hospital. A few weeks later, while on a pass home, and plagued by a thought of killing the victim's children, he telephoned his therapist and confessed to the murder. He claimed that he wanted to be punished for his act; but, in deference to his family, he would not report to the police. When examined by one of us (L. B. S.), he described the act in great detail and apparently had a need to confess and to ventilate. He claimed that the act was committed solely for money and not for thrill "like those nuts you read about." He was unemployed at the time of the crime and lived with his alcoholic wife in a run-down section of the town. He had a history of criminal involvements such as "taking numbers" and a few holdups and burglaries. Psychological tests revealed a low-average intelligence with possibly mild organicity due to chronic

alcoholism. The Rorschach test was meager and constricted, with an unusual perseveration of the perception of blood. He responded to the TAT cards with themes of murder and guilt over the act.

*Comment.* Borderline adjustment, alcoholism, previous criminal activities, some preoccupation with violence, poorly integrated ego structure, and diminished empathy place this offender in a psychological frame capable of murder when stimulated by prospect of monetary gain. In spite of his psychopathology, impulsiveness, and possible conflicts involving relationships with the opposite sex (which may explain the multiple stab wounds and his claim that he did not murder for thrill), the act would not have taken place without a value system derived from environmental influences.

*Situational homicides.* Situational offenses are in essence a reaction to a stressful situation. They are mostly committed by individuals with little or no psychopathology, although all types of personalities may be involved. The offenses may be adaptive, in the sense that they serve a logical purpose, or maladaptive and committed in a state of fear, anger, or despair. They may be committed impulsively, or they may be premeditated. What may appear to be purposeful murder for gain will on deeper inquiry present itself as a pathological event, with the gain motive either secondary or a coverup. Calvin and MacDonald (1959) describe a 23-year-old married man who, after insuring his mother, placed a time bomb in her valise. The bomb exploded eleven minutes after the plane left the airport. His mother was cold and rejecting and had refused to stay with him and his family for Thanksgiving, preferring to spend the holiday with a friend. A review of the case makes it obvious that he reacted to maternal rejection and that the insurance played a secondary role. The best example of a purely situational murder for gain is described in Theodore Dreiser's classic *An American Tragedy*. The main character of the story impregnates a working girl in his uncle's factory just at a time when a rich girl falls in love with him. The working girl's pregnancy thus stands in the way of his prospects for a rich future. The thought of murder enters his mind unobtrusively when he reads in a newspaper about a canoe accident in which a young woman was drowned but her consort saved. After a great deal of hesitation and inner struggle, he decides to stage the same kind of "accident." The

type of situational murder described in Dreiser's novel is not frequently seen in psychiatric practice. Most of the situational murders one sees have an element of impulsivity, fear, anger, and despair and occasionally a paranoid tinge to the thinking processes, along with frequent alcoholic inebriation. The following case illustrates a typical situational murder:

*Case 4.* An 18-year-old youth without a history of delinquency or unstable behavior and raised in a stable, working-class family was charged with manslaughter. He was of bright intelligence, and projective techniques did not elicit serious pathology. Shortly before the incident, three new families moved next door, creating ethnic tensions and disrupting the life pattern in the neighborhood that the family had inhabited for several decades. Many arguments and exchanges took place. On the day of the incident, he came home in a bad mood, having been laid off from his job. There was a great deal of screaming and noise in the house next door, and he saw the neighbors throwing garbage out of the window. Since he had been threatened previously by one of the neighbors, he became frightened when he saw one of them across the alley holding a stick. He took a spear gun out of his car and went into the house. He said that the spear gun went off "by accident" and then he suddenly realized that the spear had hit someone. He called his girl friend and was glad to be at the police station, since he was afraid of being killed by friends of the neighbors.

*Impulsive homicides.* Impulsive offenders react with anti-social acts to various environmental and situational stimuli. They differ from situational offenders by the multiplicity of their antisocial acts and by their poor impulse control. The offenses are diffuse, poorly structured, and unpremeditated or only partially premeditated. The life pattern of these offenders is marked by lack of direction and unpredictability. Psychiatric and psychological evaluation reveals looseness of personality integration as the main characteristic. The offenses may be aggressive (including homicide) or nonaggressive or a combination of both. A good example of a typical impulsive case (Revitch, 1975) is the 19-year-old youth with a history of juvenile offenses, vandalism, breaking and entering, and use of drugs, who, while babysitting with his 19-month-old niece, raped her rec-

tally, thus causing her death. The following case is also illustrative:

*Case 5.* A 25-year-old male stabbed two people, one of whom died as a result of the wounds. The offender was under the influence of liquor during the act. In the interview, he had a tendency to gloss over and minimize the various aggressive acts in his past, presenting them as purely incidental, unrelated to each other, and of little importance. On the day of the incident, he had had an argument with the owner of a tavern, who allegedly threatened him with a hammer. In anger he left the tavern and returned with a knife to show that "no one could just walk all over me." As to the past incidents, he related a fight in a gambling establishment, an arrest for an argument with a police officer, and fights with his wife, whom he suspected of infidelity. These arguments were so severe that police were called. Psychometric tests found him to be of average intelligence, while projective tests elicited suspiciousness, emotional instability, and poor self-concept.

*Catathymic homicides.* The term *catathymic* was introduced by Maier (1912) to describe psychic disorders "marked by perseveration, in the course of which a single depressive topic tends to be complex determined" (see Dorland, 1974, p. 273). Gayral and his colleagues (1956) described, under the name *catathymic paroxysms*, emotional outbursts with neurovegetative reactions. Revitch (1964) used the term to describe severe emotional outbursts presenting a differential diagnosis with psychomotor epilepsy in a prison population. It was Wertham who introduced the concept of catathymic crisis into psychiatric criminology. He originally defined his concept as follows: "A catathymic reaction is the transformation of the stream of thought as the result of certain complexes of ideas that are charged with a strong affect—usually a wish, a fear, or an ambivalent striving" (Wertham, 1937, p. 975). In a subsequent publication (1966), he defined the catathymic crisis as "delusional thinking with the patient being driven to a violent deed without a rational conscious motive, with the act having a symbolic meaning and the victim not counting as a person, but as part of an overpowering image." Menninger and Mayman (1956) consider Wertham's catathymic crisis as a particular

form of episodic dyscontrol (that is, failure of homeostatic regulation of ego function). We define the catathymic crisis not as a diagnostic entity but as a psychodynamic process, frequently accompanied by psychotic disorganization and characterized by accumulation of psychic tension leading to an aggressive explosion, which usually is followed by relief. The accumulation of psychic tension is a result of conflictual relationship with another person, the victim having a symbolic meaning as defined by Wertham.

Superficially integrated individuals secretly struggling with feelings of inadequacy, and particularly sexual inadequacy, resort to violence when relationship with the potential victim challenges the sense of integration, adequacy, and sexual competence. Violence, usually resulting in homicide and at times followed by suicide or a suicide attempt and frequently preceded by suicidal and homicidal thoughts, serves the purpose of freeing oneself from the source of threat to the psychic homeostasis. We divide the catathymic process into acute and chronic. The acute process is characterized by a sudden aggressive or homicidal explosion. Ruotolo (1968, 1975), using Karen Horney's concept as frame of reference, points to the injury of the pride system as a threat to ego integrity in cases of sudden murder. Weiss and his colleagues (Weiss, Lamberti, and Blackman, 1960; Blackman, Weiss, and Lamberti, 1963) define sudden murder as a single, isolated, and unexpected episode without personal advantage or profit. In most of their cases, there was a background of a cohesive family with a domineering and overprotective mother stressing conformity, and a personal feeling of inadequacy, sexual confusion, hostility, and isolation. Cases of murder due to obvious provocation and thus explainable do not belong in this category. A typical case of an acute catathymic process was described by Satten, Menninger, and Mayman (1960), whereby a noncommissioned officer suddenly choked a preadolescent girl and drowned her without any obvious provocation and with partial amnesia for the event. The following case also is illustrative:

*Case 6.* A 30-year-old teacher without a history of previous offenses killed a 7-year-old girl when she rang his doorbell to sell Brownie cookies. Since she had no change for a twenty-dollar bill, she said she would return later. This offer suddenly angered and humiliated him. He then ordered her to follow him into the basement and to un-



dress. He attempted intercourse, but due to premature ejaculation he failed to consummate the act. In a state of fury, he battered her. When he realized that she was dead, he put her body in a plastic bag and disposed of it far away from home. On the day of the offense, he was depressed and felt lonely and inadequate. At the time of the incident, he lived with his widowed mother and grandmother. His mother described him as a good, helpful, and gentle boy and a young man who "would not even kill a spider." The battering of the child was extremely violent, since autopsy revealed extensive injuries.

He remembered the event in great detail. In a face-to-face interview and under the influence of sodium amytal injected intravenously, he impressed one with his facile verbalization, rich fund of knowledge, and clarity of expression. His affect was rather flat, even under the influence of the drug. He admitted to previous outbursts of anger, which he expressed in destruction of objects, but he never fought physically. Many inadequacies were discovered under the façade of adjustment. Thus, he felt ill at ease in situations of intimacy and friendship. He was engaged to be married but broke the engagement. He viewed sexual relations as total domination of man over woman. A verbatim account of his feelings during the murder is illuminating: "I couldn't figure out how to pay for two boxes of cookies. I was embarrassed. She came up with the answer and I did not. She was a kid and I a teacher. When I first saw her, I felt nothing. After I got mad, I figured the way to get even was to sexually assault her. It was just a feeling of how to get even, of how it feels to make someone else embarrassed and stupid. I grabbed her and when I grabbed her I thought I had to kill her to get rid of her. After it was over, I felt relieved but also scared." The psychological tests revealed a full-scale IQ of 128 on the Wechsler Adult Intelligence Scale. The projective tests elicited extreme sensitivity to the fine meanings of the environment, free-floating anxiety, underlying depression, and strong reaction to emotion-arousing stimuli. A confused sexual identification, with fear of females, was elicited. Electroencephalogram was normal.

In the chronic catathymic process, depressive mood and schizophrenic-like thinking and ruminations may precede or

accompany the violent act. In retrospect the act itself and the various events preceding it impress the offender as ego alien. During the time preceding the act, the future offender may inform someone else, directly or indirectly through veiled messages, that he may explode. His statements are usually not taken seriously. A large number of infanticides categorized as child-centered obsessional depression (McDermaid and Winkler, 1955) fall into this category. The following case is an example of the chronic catathymic murder:

*Case 7.* A 26-year-old teacher shot his girl friend while he was a passenger in the car she was driving. He apparently discharged all the bullets in the handgun and, following the act, ran to a telephone to call his priest.

He had met this girl eight months previously, and the meeting had resulted in an intense love affair, with marriage in prospect. A few months after meeting her, he became depressed, began drinking, and eventually thought of suicide. The suicidal ideas progressed to a fantasy of murder-suicide. His actions became bizarre. On one occasion he punctured the tires of her car. On another occasion he left school an hour earlier, feeling compelled to stand on the side of the road with his hand extended forward and covered with his coat—so that, if she passed by, she would think he was holding a gun. During all this time, the relationship with the girl fluctuated between expressions of love and feelings of coolness. He described the last few months before the murder as “a total chaos” and said that he had felt like an automaton although he performed his teaching duties. On one occasion he told a couple he knew that he was going to kill his girl friend, but the couple interpreted it as mere talk due to alcoholic inebriation. Several months before he met his girl friend, he had broken an engagement. In describing that incident, he said that it gave him a feeling that his “dilemma had been solved.”

When he was examined in jail, he indicated that the act and various events leading to the murder impressed him as ego alien and illogical. On the psychological tests, which he took following the act, he scored a full-scale IQ of only 103 on the Wechsler Adult Intelligence Scale. This was obviously below his true capacity. The Rorschach indicated a great deal of fluidity of thought processes and bizarre percepts, so that he was diagnosed as

schizophrenic. While he was in prison, he became so depressed that it was necessary to transfer him to a state hospital for electric shock therapy. He was paroled eight years later. During his imprisonment, he earned a master's degree through correspondence and is at the present making an excellent work adjustment in his chosen field. He feels more secure in his relationship with the opposite sex. There is no clinical evidence of psychosis, but his Rorschach retest still indicates looseness of thinking processes.

*Compulsive homicides.* The compulsive offenses are on the extreme endogenous end of the motivational spectrum. They are entirely determined by inner psychological sources, with little or no environmental influences. The offenses may be committed in a specific ritualistic manner, or they may be of a more diffuse nature; in either instance, an underlying common need is variously expressed. Fantasies may precede the offenses by many years. Once they start, the offenses may be repeated frequently or at intervals of many years. Newspaper accounts and the literature are filled with examples of bizarre murders for which the offender served a long sentence and then performed a similar act while on parole. Guttmacher (1951) reports the case of Eugene, who killed two 11-year-old girls while on parole from serving a sentence for attacking several women with a penknife. In another publication, Guttmacher (1963) reports the case of a 40-year-old male released from prison after serving a sentence for murder and mutilation of a prostitute; thirteen years later, he served an eighteen-month sentence for threatening a prostitute with a knife; three years after this incident, he killed and beheaded another prostitute. One of us (E. R.) examined a 23-year-old man of very superior intelligence who had been condemned to death for the brutal murder of a young girl. His death sentence was eventually commuted to life imprisonment. Finally, after fifteen years in prison, he was paroled. After a few years on parole, he knifed a woman whom he had abducted in his car.

Some of the compulsive murderers and aggressors attempt to resist their compulsions, but this may induce a great deal of tension and anxiety. William Heirens, famous for his message "Catch me before I kill again. I can't help myself" (Freeman, 1955), had headaches when he resisted the impulse. He is quoted as saying, "I resisted for about two hours. I tore

sheets out of place and went into a sweat. When I got these urges I would take out plans and draw how to get into certain places. I would burn up the plans. Sometimes they helped" (Kennedy, Hoffman, and Haines, 1947, p. 118). There are also individuals whose antisocial and homicidal compulsions, normally dormant, are released either through the sanctions from above or by permissiveness and disintegration of the social order. Compulsive offenders of this type have a better personality organization than those whose fantasies and impulses break through in violent acts without environmental stimulation. Most if not all of the compulsive murders in our experience and as revealed in the literature are sexually determined. A young boy, for instance, who is exposed to maternal overprotection, overt or covert seduction, infantilization, or outright feminization develops ambivalent feelings and hostility toward his mother; and these feelings are then transferred to women in general (see Revitch, 1965). The following case, seen by one of us (L. B. S.), is classic:

*Case 8.* G. H. is a 16-year-old high school student with a history of bizarre break and entries and destructive vandalism prior to his sadistic murder of two women and an assault on a third female. The first victim was his high school teacher. The week before the murder, he had received an award from her, and he stated in the interview, "I really had nothing against her." He described in detail how he woke up at night, laid out his burglar's tools, climbed out the window, and went to the teacher's home—allegedly to rob her. When she resisted him, he strangled her, took a few dollars, and ran out of the house. He slept well that night, and he was even surprised when someone told him the next day that she was found dead. He said, "I didn't realize I did it." His second victim was a 62-year-old woman. He broke into her house and, when he found that she was not in, waited for her for five hours. When she entered the house, he forced her to give him money. He then tied her up, gagged her, tore off her clothing, and beat her. Finally, he drowned her in her bathtub, comparing this experience with the sadistic drowning of a dog several years before. He added in the interview, "I pulled and twisted her breasts. I just wanted to rob her." After this crime, he again slept well at night and went to school the next day as if nothing had taken

place. He said, "I did not think I did it." In addition to these murders, he assaulted another woman, mistreating her brutally for several hours. He twisted her breasts, gagged and blinded her, and finally left her in a nearby park after forcing a toothbrush into her vagina.

He had begun breaking into houses two years prior to the murders. These break-ins usually took place when it rained. He reported a state of depersonalization during these acts: "It was like I dreamed it. One time while in the house I thought 'holy cow, what am I doing here?'" His life history is replete with violence and humiliation at home. In addition to drowning a dog, he fantasized killing his brother and raping women. An isolated, friendless, and lonely youth, he spent much of his time in his room, listening to seven radios.

In the interviews, he appeared to be emotionless but would become explosive when asked to repeat a statement. He mentioned an inner voice telling him to kill. Under the influence of sodium amytal injected intravenously, he revealed sadistic fantasies, episodes of peeping, and a feeling of power and satisfaction when the victims begged him not to hurt them. His full-scale IQ on the Wechsler Adult Intelligence Scale was 106. Projective tests indicated a weakly supported, brittle ego whose integrity is severely threatened by primitive archaic impulses. The content of the Rorschach responses was replete with violence: atomic explosions, attacks by animals and by a monster, a man facing a firing squad with blood rushing from him, and so on. The most characteristic response to the Thematic Apperception Test was murder of a woman for refusal to have sexual relations. He said, "There is too much anger after a person says no. He just can't stop himself. He must turn himself in."

*Comment.* This man is a compulsive sex murderer with a history of bizarre burglaries committed solo, sadistic fantasies, mistreatment of animals, and schizoid withdrawal. The case is similar to that of Heirens (Kennedy, Hoffman, and Haines, 1947), who started his career of gynocide with a compulsion to burglarize homes. Like Heirens, G. H. also struggled against his compulsion; he told the examiner (L. B. S.) that he prayed at bedtime not to wake up, so that he would not have to commit his crimes again.

### Prognosis and Disposition

Psychiatrists cannot readily predict when or whether someone will commit a violent act. There are no common features that enable us to predict violence in paranoid schizophrenics, for example, because we cannot foresee all the social situations the paranoid will encounter. Tanay (1975, p. 23) states: "The description of a tendency is frequently confused with prediction of the occurrence of a future event like homicide and suicide." Our thinking coincides with Tanay's view that the prediction of dangerousness should be based on the evaluation of a tendency and a possibility. In the short-range prognosis, threats to kill should be taken seriously (see MacDonald, 1963, 1968). Threats of this nature are particularly common in catathymic murders. Homicides followed by suicide or by the request for execution are, essentially, suicides (West, 1966). One man whom we examined had traveled from New Jersey to Arkansas in order to get a gun and commit suicide. The suicidal impulse, however, was transformed into a compelling need to kill and resulted in the rape-murder of a preadolescent girl. Thus, in some cases suicidal preoccupation may foreshadow homicide.

Additionally, Miller and Looney (1974) described the various degrees of dehumanization of the victim as a predictor of homicide. They also mention a low-risk group—composed of people who will dehumanize and kill only when the act is "validated" by their social environment. Gault (1971, p. 452) describes "the enthusiastic advocates of wanton destruction" in soldiers slaughtering Vietnamese civilians during the war, but he also adds that "a number of fairly ordinary men have been psychologically ready to engage in slaughter" (p. 454). Dehumanization by war, dilution of responsibility, and the pressure to act, among other factors, were responsible. Consequently, under certain conditions many individuals seem to be capable of homicidal acts. Hillman and Blackman (1966) describe a triad of enuresis, fire setting, and cruelty to animals as predictive for homicide. We rarely observed such a combination in our cases. In compulsive sex assaults and sex murders, however, we found quite frequently a peculiar hatred for cats (Revitch, 1965).

In cases of sex murder or sexual aggression, the police usually look for people with a history of sexual offenses; yet most of the sex offenders are passive, nonaggressive individuals.

Only three out of forty-three cases in our series had a record of previous sex offenses. Guttmacher (1963) found only one case convicted for exhibitionism in his case load of sexually aggressive offenders. The following conditions seem to be predictive of a dangerous sexual assault or sex murder: unprovoked assaults on women; breaking and entering committed solo in bizarre circumstances; fetishism of female underclothing; expression of hatred, contempt, or fear of women; violence against animals—particularly hatred for and violence against cats; violent and primitive fantasy life; confusion of sexual identity, as elicited on projective tests; sexual inhibitions and moral preoccupations concerning sexual conduct; emotional shallowness; and feelings of isolation and blurring of reality boundaries (Revitch, 1965). Case 8 had most of the predictive characteristics mentioned above, and his prognosis as to future assaults should be considered as very poor.

Even though what we predict is frequently only a possibility and at times a probability, we can and must offer a prognostic consideration to courts and parole boards. The prognosis is based on our classification of offenders. It is clear that the pure situational offenders have the best prognosis. The compulsive offenders, particularly those with a well-defined ritualistic pattern, have the worst prognosis. It is the compulsive offender, particularly the one committing dangerous sexual assaults and murders, who will repeat the same offense following years of imprisonment. The prognosis for environmentally stimulated offenders will depend to a great extent on their value system, empathy, associations, and opportunity to commit crimes. Murder in these cases is just incidental and is less likely to be repeated. The impulsive and catathymic offenders have a better prognosis than the compulsive offenders but not as good as in situational cases. The catathymic murders usually resolve a conflict stemming from some conflictual relationship and therefore are not likely to be repeated. However, poor ego integration with aggressive fantasies and compulsive features may on occasions result again in a similar act. The following case is illustrative:

*Case 9.* This case was reported previously (Revitch, 1965) and is now reported because of the final outcome, resulting in murder-suicide eighteen years later. The offender was examined by one of us (E. R.) for sanity determination in 1959, when he killed his girl friend with

multiple stab wounds while riding with her in his car. Following the murder he surrendered to the nearest state police station. His past adjustment was marginal. He had quit school in the ninth grade, and six months after enlisting in the armed services he was discharged with a diagnosis of emotional instability. The seven-month relationship with his girl friend was marked by a torturing need to test her love and to hurt her, either physically or mentally, and by feelings of guilt over sexual relations. The murder was preceded by suicidal and homicidal fantasies, which grew in intensity. He told his minister and a friend about these preoccupations but did not receive support or guidance. On one occasion he took his father's shotgun, intending to kill his girl friend; instead, he threw the gun away. He described this experience as ego alien and of a dream-like quality. He frequently felt that his actions were automatic, as if committed without his participation. About the killing episode he said, "I felt as if someone else was doing my movements." In the interviews in jail, he seemed concerned not so much about the death of his girl friend as about the fact that she had sinned by having sexual relations with him. He displayed religious preoccupations, quoting the New Testament and comparing his act of killing with Abraham's sacrifice of Isaac. He disclosed bizarre fantasies, such as throwing his girl friend over a cliff or throwing poisonous snakes at her. He claimed that the whole incident was like a bad dream, that he knew it was not right to kill her but that he had felt it was right while he was doing it, since he heard a voice from within himself. According to the psychological report of 1959, his form level on the Rorschach test was so poor that it indicated distortion of reality testing. Shortly before his parole, he was seen in the state prison by one of us (L. B. S.) and was found to be bizarre and deteriorated. While he was on parole, eighteen years after the incident, newspapers reported that he shot another girl friend and killed himself.

*Comment.* Motivationally this murder belongs to the catathymic group. Diagnostically, however, this man was a poorly integrated chronic schizophrenic who further deteriorated in prison. The jury did not accept the insanity defense under the McNaughten Rule, and one of the prosecution psychiatrists described the defendant as



"conscious of the act" and able to distinguish right from wrong. This psychiatrist explained the act as a consequence of "resentfulness" because the girl would not marry him.

It is clear that compulsive, catathymic, and many impulsive murders are pathological and ego dystonic, so that purely legal action will not deter or rehabilitate but, on the contrary, will present a danger to society. These cases should be handled in specialized institutions, with Herstedvester in Denmark serving as a model (Stürup, 1968). The situational and particularly the environmentally stimulated offenders should be treated in accordance with the correctional model. It is believed that this type of disposition would be more logical than the one based on the sane-insane issue. Case 9 illustrates the tragedy of a purely legal approach to pathological, ego-dystonic murders.

# The Catathymic Crisis

*Frederic Wertham*



The conception of catathymic behavior was introduced by Maier (1912). In 1937 I refocused the concept to help explain phenomena found in the area of forensic psychiatry. As is often the case with psychopathological terms, *catathymic* has been given different meanings by different authors. The variety of definitions has continued to the present (see, for example, Gayral and others, 1956; Menninger and Mayman, 1956; Revitch, 1964), including the very recent conceptualization by Revitch and Schlesinger in the preceding chapter. Catathymic reaction

This chapter is an updated version of an earlier paper entitled "The Catathymic Crisis: A Clinical Entity," presented at the Johns Hopkins Medical School on the occasion of the twenty-fifth anniversary of the Phipps Psychiatric Clinic and the celebration of Adolf Meyer's seventieth birthday. Louis B. Schlesinger has been most helpful in editing this chapter for this publication.

originally was defined as "the transformation of the stream of thought as the result of certain complexes of ideas that are charged with a strong affect—usually a wish, a fear, or an ambivalent striving" (Wertham, 1937, p. 975). Catathymic symptom formation is caused by one latent idea rather than a generalized abnormal mood. It consists of a fixation on one topic and is always accompanied by marked egocentricity. A disturbed balance between logic and affectivity predisposes to catathymic thinking.

Outside of the development of paranoia and paranoid delusions, little attention has been paid to catathymic symptom formation. The catathymic crisis is characterized by one essential feature. That is, the patient acquires the idea that he must carry through a violent act; to that end, he develops a plan and feels a strong urge to put the plan into action, although he may resist the urge and therefore hesitate and delay before committing the act. Usually the violent act is imbued with symbolic meaning. The patient's thinking takes on a delusional character, with marked rigidity and inaccessibility to logical reasoning. The catathymic crisis is a clinical entity—a pathological condition with a beginning and a course.

The stages of the catathymic crisis are as follows:

1. An initial thinking disorder, which follows an original precipitating (or traumatic) circumstance.
2. Crystallization of a plan, when the idea of a violent act emerges into consciousness. The violent act is seen as the only way out. Emotional tension becomes extreme, and thinking becomes more and more egocentric.
3. Extreme emotional tension culminating in the violent crisis, in which a violent act against oneself or others is attempted or carried out.
4. Superficial normality, beginning with a period of lifting of tension and calmness immediately after the violent act. This period is of varying length, usually several months.
5. Insight and recovery, with the reestablishment of an inner equilibrium.

If the fifth stage is not reached, the individual may return to the second stage and think again of a violent act; this second act has a definite symbolic psychological connection with the initial violent act, although on the surface they may be quite different. This is not a recurrence but a continuation of the

same process. It continues because the patient has not really achieved insight into the initial psychological constellation which he developed at stage 1. Full recovery from the catathymic crisis requires insight into both stage 1 and stage 2.

Differential diagnosis of the catathymic crisis as a clinical entity comes only after all other possibly relevant mental conditions are excluded. For instance, impulsive and irrational acts of violence may occur with overt psychosis. Moreover, in psychotic individuals such an act, or attempted act, precedes improvement or even recovery. In an early paper on suicide, Jameison (1936, p. 1) expressed this phenomenon clearly: "There is the common observation that certain patients, after failure (an unsuccessful attempt) to commit suicide, abruptly become much better mentally. The depression seems to lift; they are cheerful and agreeable and temporarily [occasionally permanently] all the various fears and tensions disappear." In cases such as these, the catathymic crisis occurs as a syndrome in association with a mental disorder.

The following case is presented as a clinical example of the catathymic crisis.

Robert Irwin, as described in my book *The Show of Violence*, was a 28-year-old unemployed male who murdered three people, two by strangulation and one by multiple stab wounds made with an ice pick. The idea of murder came to him while he was walking alone in a state of loneliness and desperation. He had had lunch earlier that day with the sister of the girl he decided to kill. Prior to arriving at the plan of murder, the patient had had fleeting suicidal thoughts. He ruminated and brooded "and then I made up my mind to kill Ethel and to go to the chair for it." He went to Ethel's house to wait for her, but she was not there. Before arriving at the home, he purchased an ice pick.

Since the intended victim was not at home, Irwin waited and talked to her mother. When the mother finally told him firmly that he must leave because of the late hour, "I hit her a terrific blow with my fist and knocked her down. She had plenty of life in her. I grabbed her by the neck and continued choking her. . . . I continued choking her for about twenty minutes before I was sure she was lifeless." Irwin then lifted her body and took it to an adjoining bedroom, where he pushed it under the

bed. He then saw the family dog and the thought of killing the dog flitted through his mind, but he did not kill it "because I felt too much pity for the animal to do it." Once again, Irwin settled in to await Ethel's return.

At about 3 a.m. Ethel's sister came home. Irwin hit her over the head, grabbed her around the throat, and carried her to the bedroom, where he left her for two hours. He stated that he had no sexual ideas or ideas of rape because of their "good friendship." The sister said: "Bob, you're going to get in trouble for this." At this point "I clamped down on her and choked her until she was lifeless. I left her on top of the bed, her mother's body lying underneath—at that moment she was the most repulsive thing I ever knew." After this, Irwin got his ice pick and went into the room of one of the boarders who lived with the family. "Byrnes was asleep. I struck him the first time in the temple, as far as I could go. The pick was about six inches long. After [I struck] him once, the poor fellow lay there twitching but did not bleed. I wanted to put him out of his misery, so I stabbed him a number of other blows about his head."

Still, Ethel did not arrive. He frantically went through every room in the home, looking for pictures of her; finding none, he took two photographs of the sister. Then he took the small alarm clock that he had found in one of the rooms and put it in his pocket. About that he said later: "Do you know, that's the one thing I'm ashamed of—stealing that clock. To kill is one thing but to be a sneak thief!" After the triple murder, Irwin left the home, feeling "as calm as I've been in my life before."

I first encountered Irwin when, several years prior to the murders, he was a patient on a psychiatric ward. He had been admitted for attempted self-castration (by tying a rubber band around his penis)—an idea that came to him, he said, after reading Schopenhauer. He was of high intelligence and aspired to be an artist. He had lived in many juvenile homes after his mother was no longer able to care for him due to the desertion of the father. At age 17 he was possessed by the idea that "mentally visualizing" images of pictures would give him a degree of mastery over knowledge, art, and himself. He also had some religious preoccupations and at one point entered a theo-

logical school to "get in tune with the Infinite." He had had periodic thoughts of suicide and murder but had been able to contain these thoughts. On one occasion when he was severely rejected by a girl, he "thought of killing her and going to the police station saying 'Here I am.' " On another occasion he even told a psychiatrist, "I was going to kill somebody so I would be hung."

*Discussion.* This case is a classic illustration of the catathymic crisis. There is a complete parallel between the first violent act against himself and the subsequent violent act against others. The first stage of the catathymic crisis occurred at age 17, when "suddenly the whole thing came to me that you have to visualize things first." This initial thinking disorder was followed by stage 2 at age 23, when, after reading Schopenhauer, he planned to emasculate himself as a way out or a solution. The third stage began the following year, when his preoccupation with this violent act and the accompanying tension became overwhelming and all-absorbing. That same year Irwin reached the fourth stage, immediately after the actual attempt at self-castration, when his tension was relieved and he felt as calm as he ever had. In this stage he gained partial insight, but only into that phase which had to do with his self-injury to his genitals.

In another period of stress, he returned to the crystallization point of the second stage, where again he decided that "a violent act was the only way out": suicide or killing Ethel and, in turn, being killed himself. The new third stage began the following year and culminated in the triple slayings. The fourth stage began the following day, when his extreme tension was completely relieved after the violent acts and he felt perfectly calm. The fifth stage had not been reached because a recovery with complete insight had not taken place at the time of my final contact with him.

The concept of the catathymic crisis as a clinical entity is indispensable for an understanding of certain forms of violent behavior. It also sheds light on many aspects of psychopathology in general. For example, in the period following a crime, the patient has a superficial appearance of normalcy but is undergoing a profound inner adjustment. This experience can lead to a complete shift in his attitude, resulting in the ac-

quisition of insight and the reestablishment of a lasting equilibrium.

The violent act is an attempt on the part of the patient to safeguard his personality. In these cases the violent act prevents developments that would be far more serious for the patient's mental health. The overt act seems to become a focus point for the constructive forces of the personality, which is otherwise in danger of progressive detachment from reality. From 1937, when the catathymic crisis was presented as a clinical entity, until the present, the concept still assumes fundamental significance in the psychopathology of violent acts. It has been included in authoritative textbooks of psychiatry and cited in court cases.

# Murder in the Family

*Jane W. Duncan*  
*Glen M. Duncan*



It is a curious subject of observation and inquiry, whether hatred and love be not the same thing at bottom. Each, in its utmost development, supposes a high degree of intimacy and heart-knowledge; each renders one individual dependent for the food of his affection and spiritual life upon another; each leaves the passionate lover, or the no less passionate hater, forlorn and desolate by the withdrawal of his subject. Philosophically considered, therefore, the two passions seem essentially the same, except that one happens to be seen in a celestial radiance, and the other in a dusky and lurid glow [Hawthorne, *The Scarlet Letter*, 1850].



Murder is defined as the willful killing of another person. This chapter considers murder within the family and will exclude from consideration both manslaughter by negligence and those killings that result from other felonious activities. In the United States in 1975, approximately 25 percent of all reported murders were perpetrated within the family (U.S. Department of Justice, 1976). Spouse killed spouse in more than half of them; in the rest, parents killed children, and other relatives killed one another. Also during 1975, 7 percent of all murders were the result of romantic triangles or lovers' quarrels. If this 7 percent is added to the 25 percent of cases of murder within the family, then one third of all murders in 1975 involved homicide "within the family," one third resulted from arguments among acquaintances, and one third were incidental to other felonies.

The perspective gained by a review of literature is biased by each author's presentation of only certain aspects of his data base. Similarly, detailed exploration of individual cases of homicide, culled from the literature and from one's own evaluation or treatment of murderers, provides data that can be unreliable. In exploration of the killer's recollections of the homicidal act and its circumstances, for instance, cues from the investigator may lead the subject to the investigator's explanation of or position on such deeds. Despite these shortcomings, various observers have demonstrated independently certain intrapsychic conflicts that appear to be characteristic of the offender involved in particular types of murder within the family.

The homicidal act is considered to be an attempt at resolution of a devastating intrapsychic conflict, a violent act with subsequent restitution of a kind of intrapsychic equilibrium. There is less agreement on the mechanism that permits the homicidal resolution of the conflict. Whatever the mechanism postulated—episodic dyscontrol (Menninger, Mayman, and Pruyser, 1963); dehumanization of the object (Miller and Looney, 1974); dissociation, psychosis, or ego syntony (Tanay, 1969)—the focus has remained on the neurophysiology or psychology of the killer. The role of the victim requires closer scrutiny.

Except in infanticide, murder within the family depends as much on the interpersonal relationship between perpetrator and victim as on the psychopathology of the murderer. The incidence of homicide increases with immediacy and continuity of spatial closeness of perpetrator and victim and with the persistence of their emotional interaction (Mohr and McKnight,

1971). Since dead men grant no interviews, only rarely does the investigator have firsthand knowledge of the murderer-victim interpersonal relationship. Nevertheless, after-the-event data often indicate that the victim contributed significantly to his own demise (Wolfgang, 1958). He may have escalated the tension beyond the likely breaking point of the assailant. Whether the resulting dangerous behavior be murder or merely assault is then influenced by situational factors, such as the availability of weapons or the physical and cognitive strengths of the participants, and even by chance—as when a bullet just hits or just misses a major vessel.

The ultimate murder in the family is murder *of* the family. The perpetrator, usually the husband, in an altered state of consciousness, goes on a rampage, destroying anyone or anything that gets in his way. The altered state of consciousness may be organically or psychologically induced. In other cases mass destruction of the family is premeditated with cold calculation. Mission accomplished, the slayer attempts or accomplishes suicide. The family members represent the extended self, and the goal is total suicide. Such slayers who survive often state altruistic reasons for the killing of the children, such as not wanting them to mourn their parents or to be orphans.

To be considered in the following pages are the various types of murder within the family and associated interpersonal relationships. Homicide may occur when a relationship cannot be sustained or let go (Rasch, 1967). The killing of a member of the family is related to the killer's *inability to escape* from an unbearable relationship (Duncan and Duncan, 1971; Mohr and McKnight, 1971; Tanay, 1969) except through violence. He cannot utilize alternatives. We will describe the function of violence and the means by which the family and the culture can either nourish or neutralize violent tendencies in family members.

### Child Murder by Parents

Resnick (1969), reviewing the world literature on infanticide, defines two distinct types of child murder by parent: "neonaticide," designating the killing of a newborn within the first twenty-four hours of life; and "filicide," the term used for the murder of a son or daughter more than one day old. He reports that most neonaticides are carried out simply because the child is not wanted. The most common reason for neonati-

cide among married women is extramarital paternity, and the stigma of having an illegitimate child is the primary reason among unmarried women. There are two groups of unmarried women who kill newborns (Hirschmann and Schmitz, 1958). First are young, immature, passive primiparas, with no previous criminal record, who deny the pregnancy and make no advance preparations for either the care or the disposal of the child. The second group of women tend to be older and more callous and strong-willed. Their crime is usually premeditated and in keeping with a previous life-style of few ethical restraints. These women fall into the amoral murderess category (Cole, Fisher, and Cole, 1968).

Resnick (1970) contrasted thirty-five mothers who committed neonaticide with eighty-eight mothers who committed filicide. Psychosis was diagnosed in only one sixth of the women in the neonaticide group, but in two thirds of the filicide group. A serious element of depression was found in only three (9 percent) of the neonaticide cases, compared to sixty-two (70 percent) of the filicide group. Suicide attempts accompanied one third of the filicides, but none occurred among the neonaticide cases. In the forty-four instances of filicide where the murderer was the father, 44 percent were psychotic and a further 33 percent were clinically depressed. Frank psychosis in the assailant is the single most common factor in precipitating filicide (Adelson, 1961; Resnick, 1970). In a majority of the cases, the offending parent expressed "altruistic" reasons for the crime. Thus, suicidal parents claimed that they could not abandon their children when they killed themselves. Other parents killed to relieve the child's real or imagined sufferings. In cases where such justification was not expressed, the child was merely consciously unwanted or died "accidentally" in the course of child battering, although the parent's intent was not primarily homicidal. Despite such lack of murderous intent, parental custody of the remaining siblings, after a child's death from battering, places them in jeopardy. This fact, together with evidence that today's abused children are tomorrow's abusing parents, should persuade courts of law to avoid returning children to homes where the abusing parent has been chronically psychotic or where the mode of abuse was flagrantly sadistic.

The key to the psychodynamics of "slaughter of the innocents" may be found in the mother's inability to accomplish the psychological tasks specific to pregnancy and becom-

ing a mother, as described by Bibring and colleagues (1961). The adjustive task of the first trimester requires the pregnant woman to accept the fetus and to incorporate it psychologically into herself. From quickening until delivery, the second task of adjustment occurs. The baby-to-be, accepted as a dormant part of herself, now begins to move on its own, and she recognizes it as the coming baby. The mother-to-be and others, including the father-to-be, view it already as another person. Thus, the woman prepares slowly for delivery and anatomical separation. The process results in readiness on the part of the mother-to-be to initiate a special relationship with her infant, a relationship unlike other relationships she has had—in which the child will always represent a part of herself and a part of her sexual mate and yet will always have to remain a person who is outside of herself, a person in his own right.

A woman who has failed to accomplish these psychological tasks of pregnancy cannot establish this relationship with her infant. In destroying the infant, the murdering parent kills an object whose very existence may have been effectively denied. There has been no advance preparation for either the care or the killing of the child. This absence of relatedness may account for the lack of remorse commonly encountered in the offending parent after the crime of neonaticide. In filicide the murdering parent kills an object who is a nonhuman proxy of the self or the sexual mate, not a person in his own right with whom the parent has established a relationship. This concept is supported by evidence that a high percentage of murdering parents attempt or complete suicide at the time of the filicide or immediately thereafter (Resnick, '1970; Tuteur and Glotzer, 1966). Occasional cases also occur wherein the murderer's conscious motive is revenge on the sexual partner.

### Murder by Siblings

Childish jealousy can terminate in tragedy when a very young child kills an infant sibling with a blunt instrument or by dropping the infant to the floor. The child offender resents the young intruder, who has threatened his security. This resentment fuels his hostile aggressiveness, but such a young killer neither intends nor expects the death that occurs as a consequence of his act (Adelson, 1972). The assailant acts to get rid of his rival, but the killer's immature level of cognitive development does not enable him to comprehend the permanence and

irreversibility of death. Additionally, he does not perceive the victim as a human object but merely as an environmental irritant. However, in certain cases (Sargent, 1962; Tooley, 1975) the small assassin is the lethal agent of the parent, who both fosters and tolerates his hostile attacks on the younger sibling. When an adolescent kills a sibling, a more complex form of parental fostering has occurred. In many instances of fratricide, the victim represents a hated parent who has stirred the adolescent's sexual or aggressive impulses to an intolerable peak of tension, then deflected the adolescent's rage toward the sibling by chronic subtle fostering of sibling rivalry.

### Matricide

Studies of the killer and the circumstances in cases of adolescent matricide demonstrate the following: (1) an unusually intense mother-child relationship, including a history of severe early maternal restrictiveness, with deprivation, provocation, and harshness by turns (Corder and others, 1976; Scherl and Mack, 1966); (2) a father who remained uninvolved in the mother-child relationship because of his absence or passivity, although in some cases he was the agent of punishment for the mother (Corder and others, 1976; Scherl and Mack, 1966); (3) a crime of extreme violence, "violence beyond death" (Mohr and McKnight, 1971); amnesia for the crime (Corder and others, 1976; Sadoff, 1971); and (4) a sense of relief and self-justification immediately after the crime (Sadoff, 1971; Tanay, 1973). In most cases the adolescent had considered killing the mother for some time, had repeatedly tried to run away from home prior to the crime, and had considered victims other than the mother. When the mother herself is killed, rather than another victim who symbolically represents her, it is postulated (Russell, 1965) that the mother-child symbiosis was so binding that other persons were of no significance to the child.

The validity of these observations is supported by a study (O'Connell, 1963) of thirteen men, ages 19 to 40, who had murdered their mothers. Gross and unnecessary violence had been used in seven cases, and most of the men immediately afterward showed relief rather than distress or remorse. Nine of the thirteen men came from broken homes with an absent father, and most lived with a possessive father. None had mature sexual feelings, and only three had heterosexual feelings at all. Half showed close interest in their mother's sexual conduct.

Various explanations have been given for the violence of the matricidal act, including the impulsivity and explosiveness typical of adolescence, or the sadism associated with malformation of the ego due to maternal deprivation at the earliest oral level. However, the amnesia for the deed itself, common in cases of matricide, suggests that the extreme violence may be a sign of dissociative homicide. The offender, in a state of altered consciousness, may persevere in lethal blows—twenty-four stab wounds, for instance. An alternative explanation might be that the killer wishes to ensure that the mother does not arise from near death to retaliate. Wounding rather than killing a deadly enemy is a dangerous, even fatal, move. The sense of relief rather than remorse upon completion of the act suggests the surcease from anxiety that is commonly experienced when something which one has long anticipated with dread is finally a thing of the past. This sense of relief occurs when the homicide is ego syntonic (Tanay, 1973).

### Patricide

In contrast to the sparseness of case reports of actual matricides, studies of patricide are numerous. Many psychoanalysts state that, regardless of the actual victim (father, sibling, friend, or stranger), the psychological murder is that of the introjected mother. However, a recent study (Corder and others, 1976), which presents and compares data on thirty adolescents charged with murder, demonstrates that the personality and family experiences of the ten adolescents who were charged with parricide (that is, killing a parent) were distinctly different from those of the two control groups—namely, ten adolescents charged with killing a relative other than a parent and ten adolescents charged with the murder of a stranger. Specifically, the adolescents who had committed parricide had fewer social outlets, fewer sexual outlets, and fewer instances of aggressive behavior. There was less evidence of poor impulse control in these adolescents and more evidence that the parents had modeled overt hostility within the home. In eight of the ten adolescents charged with killing a stranger, either a parent or some other family member had served prison sentences for crimes not connected with the family. In the group of adolescents who had killed a friend or relative other than a parent, five had a father or mother who had been diagnosed at one time as psychotic.

In Corder's study all six of the adolescents charged with

murdering their fathers came from homes in which the father was a chronic alcoholic who was severely abusive to both the youth and the mother. The mother endured this abuse and maintained a close nurturing relationship with her son or daughter. In regard to the hypothesis (Sargent, 1962) that the adolescent who kills a member of his family may be acting out the covert wishes of one parent or others in the environment, it is noted that the majority of the widowed parents of parricidal adolescents remarried soon after the murder and offered acceptance to the adolescent offender.

These data repeat and validate the observations of many other authorities that parental brutality is a significant factor leading to reactive or ego-syntonic parricide (Tanay, 1973). The data support the "lockage" concept (Rasch, 1967) that murder occurs when there is inability to escape or give up a relationship that can no longer be sustained. As Sadoff (1971, p. 68) has said, "The bond that existed between child and parent was . . . one of fear and hatred on the one hand and an inexplicable loyalty and yearning on the other. . . . [The child] could [not] free himself of the bond . . . without explosive violence." Suicide and homicide seem to be the only options for the offender; he is unable to resolve the situation by nonfatal means, such as geographical separation. Psychological separation here seems to imply the death of at least one of the pair. Similarly, the killer has been unable to utilize the many alternatives referred to as matricidal equivalents (Lindner, 1948). It is precisely the failure of the offender to recognize and utilize alternatives to violence as a means of solving the conflict that deserves focus.

### Husband-Wife Homicides

Only in exceptional cases do stormy marriages end in murder. During 1975, in murders involving husband and wife, the wife was the victim in 52 percent of the incidents and the husband in the remaining 48 percent (U.S. Department of Justice, 1976). One study (Cole, Fisher, and Cole, 1968) of the personality of women who commit murder demonstrates that a masochistic woman, after long suffering, may finally kill a tormentor husband. Either the value of masochism has worn thin or she has gradually discarded alternative means of extricating herself from the marriage. Possibly the psychodynamics are similar to those reported by Cormier (1962), from a study of imprisoned men who had killed their wives. He observed a

repetitive pattern in which marital partners were interlocked by an exceptionally strong tie. Despite sometimes conscious knowledge of the growing danger of living together, the husbands were unable to part from their wives. Even though the marriage had been irrevocably lost, the husband avoided the work of mourning the loss by continuing in an unendurable "marriage." After the killing of his wife and during the long period of imprisonment, harsh reality forced him to mourn both the wife and the marriage.

Research on the role of the victim in criminal homicide (Wolfgang, 1969) demonstrates that some individuals virtually commit suicide by provoking others to kill them, a phenomenon termed "victim-precipitated homicide." Victim-precipitated homicide is significantly associated with mate slayings wherein the husband is the victim. When the husband is the perpetrator, the mate slaying, like matricide, is frequently unusually brutal. This suggests that the wife-victim may be a mother surrogate. The wife-victim often triggers the killing by threatening to leave the husband permanently or by casting doubt on his masculinity. Regardless of precipitating factors, the personality structure of the offender, or the irrevocable loss of the marriage, these crimes have in common the apparent need of two people to remain together until death.

### Control of Destructive Aggressiveness

The literature concerning family homicide is replete with descriptions masquerading as explanations. Data are used to wage war in the ongoing controversy regarding nature versus nurture as the origin of destructive aggressiveness. Current knowledge of infant and child development demonstrates that such controversies are fruitless and redirects attention to the fact that behavior is a consequence of continuous interaction between an organism and its environment. The acquisition or impairment of individual internalized mechanisms for control of aggression occurs in the sociodynamics of family life. It is the unique function of the nervous system to record experiences of human transactions over time and progressively to evolve new patterns of behavior for effective adaptation to life in social systems (Kolb, 1974). The failure of the individual to develop realistic control of his aggressiveness—a control which permits inhibition or release of measured aggressive action in appropriate situations—may be related either to incapacity of the



brain or to specific past interpersonal experiences or to both. Maturation of the personality requires that external control of behavior, originally provided by parents and indirectly by the culture, be internalized. Certain interpersonal relationships impede this process: severe emotional deprivation, leaving a lack of experience in relating to other people; parental brutality, which establishes a pattern of identification with the aggressor, so that the individual inflicts on others the violence that he himself suffered as a child; and parental fostering of specific super-ego defects in the child, who becomes the agent of the parents' destructive impulses.

It is equally important to be clear about those experiences that enable the growing child to channel his aggressive tendencies constructively. How may he learn to express his aggression in fantasy, wit, sarcasm, scorn, obscenity, or silence (Kolb, 1974)? What experiences should be provided to teach him to discharge his aggressive impulses in games, arguments, creative sublimations, or even neurotic substitutions? When a child's aggressiveness is aroused by a frustrator, what mechanisms allow him to substitute for the frustrating person some other person, himself, an animal, or an inanimate object? What pleasurable experiences or gratifications in interpersonal relationships should be afforded the child as a means of neutralizing or inhibiting his expressions of hostile destructiveness when he is frustrated? In brief, a comprehension of violence within the family requires knowledge of not only what went wrong but also what failed to go right.

In order to distinguish between permissible and impermissible expressions of hostile aggressiveness, the child must have a brain capable of recording and retaining past experiences of both expediency and morality. The usefulness of these data is in turn related to the brain's capacity for making associations with other experiences and providing immediate recall when current perception of the environment signals a problem situation. Only thus can the individual formulate and carry out an appropriate response. Those who physically assault others have a very limited repertoire of responses to problem situations—either because their brain is anatomically or physiologically impaired or because they have experienced inappropriate human transactions.

Acute impairment of brain function due to intoxication or epilepsy can nullify an individual's control of his hostile impulses. Chronic impairment of brain function may hinder the

individual's development of adequate control mechanisms. Mental retardation associated with failure of brain growth is one obvious example. However, certain other conditions of chronic impairment of brain function occur in persons of average or above-average intellect and are not due to disease or trauma. One condition that clearly impedes development of internal control of hostile aggressiveness is termed "specific language disability." This disorder in speech and language is believed due to late acquisition or arrested development of some cortical functions. The child with this disability has difficulty with the processing and organization of auditory linguistic perceptions. He cannot readily acquire the vocabulary and syntax that permit comprehension and use of the language system of his culture. He lacks skill in understanding the verbal communications of others and in expressing his own thoughts; additionally, he cannot utilize a verbalized thought process to select from various options an appropriate response to problem situations. A child who has achieved only a concrete mode of cognition cannot formulate the abstract concepts essential to the use of fantasy, wit, or sarcasm to contain or modulate expressions of anger. Words fail these linguistically impaired children, and so they express their hostile destructiveness in impulsive motoric behavior. Failure of verbal symbolization and poverty of fantasy are characteristic findings in adolescents and adults who physically assault others.

Like children with brain impairment, children who experience emotional deprivation, parental brutality, or parental fostering of conscience defects will not establish control of their own aggressiveness. Other patterns of family interaction influence both the degree and the flexibility of a child's control of his behavior. Parents use force and threat to socialize children and thereby teach them that force is useful. For instance, a parent who reacts to his youngster's display of violence by slapping the child or shouting at him thus demonstrates that "violence is all right if one is older and stronger, and makes use of it under the guise of suppressing it" (Bettelheim, 1966, p. 53). The child also learns that "force is very effective at stopping others, and that force or its threat can change other people's calculations of profit and loss. . . . The child experiences this directly, and watches it in others. . . . [He] learns to make differentiated responses . . . to gauge, however incorrectly, which people seem more willing and able to fight. . . . He also learns, as part of this training for violence, that others are more or less likely to jus-

tify his violence; that is, others may support his own evaluations" (Goode, 1971, p. 630).

These patterns of family interaction may ultimately generate violence. Children imitate those who have modeled the use of force and violence. They learn the various gradations of violence for different occasions and the degree of force necessary to achieve an objective. They learn a set of rationalizations and justifications for violence. The baseball player who slides into second base, spikes flying, and injures the second baseman is cheered if he thereby breaks up a double play. The hockey defenseman who prevents his opponent from scoring a goal by tripping him is hissed or applauded, depending on the loyalties of the spectators. Thus are children taught that often the end justifies the means. Violence is simply a shortcut toward an objective. The child who has learned no effective alternatives to violence will use it to gain his objectives. Subsequent punishment, if it occurs at all, will not deter his future use of physical aggressiveness if he enjoys the achieved objective more than he dislikes the punishment. Although these patterns of family interaction do not lead directly to homicide, they set the matrix for the use of physical assault when other options are unavailable.

Parents transmit to children, always with some distortion, the accepted and at times ambiguous tenets of society:

We know of no human society that does not distinguish between permissible and impermissible killing. To kill a human being in forbidden ways is murder; to kill the trespasser, the enemy, is approved, or even enjoined. But most human children do not have demonstrations during childhood of the distinctions between murder and the enjoined, approved, brave killing of other human beings. How do they learn? . . . In every culture children are taught which creatures they may and may not kill and how. . . . A fly may be swatted but it is cruel to pull off its wings. A chicken may be killed for eating, but this must be done quickly and "mercifully." Ants that get into the kitchen may be killed with spray; but to tread on an anthill for no reason is disapproved. Cats may be kept to kill mice . . . but children are discouraged from watching a cat "torture" a half dead mouse or bird. . . .

Then there are ambiguities, a porcupine that gets under the house—should or should not Daddy kill it? Delicately, precisely, carefully, within each sub-culture . . . the lines are drawn. Pests to be killed, food to be eaten, pets to be loved are discriminated for the growing child [Mead, 1964, p. 20].

These examples can be multiplied indefinitely. Is it acceptable to shoot at the neighbor's dog when it is attacking one's pet rabbits? How does one dispatch to death the baby birds evicted from the destroyed nest of the grackle which has been replacing the preferred robins? What is to be deduced from the controversy that surrounds the "Gopher Count," a farming community's annual celebration of the destruction of gophers that eat the farmers' crops? The youngster who kills the most gophers is crowned king of the festival. Moreover, the participants must validate their slaughter by supplying the paws of the rodents. Although this may be seen as constructive channeling of destructive aggressiveness by members of the farming community, it is not so viewed by citizens of the adjacent larger cities, unless they are former farmers who migrated. Morality is relative, and "a certain alloy of expediency improves on the gold of morality and makes it wear all the longer" (Marquis, 1949, p. 161).

### Murder in the Family: A Process

Many persons who do *not* kill nevertheless share with killers similar character traits and backgrounds: lack of tolerance for anxiety, accumulated excessive rage, inadequate impulse control, and early destructive interpersonal experiences that arouse overwhelming affects. Psychoanalytic formulations describing the ego malformation, borderline personality organization, and character pathology and narcissism of the homicidal offender, although useful, do not explain the particular lethal expression of his destructive aggressiveness. Though many persons are potentially homicidal, murder is not inevitable. A constellation of factors in dynamic interplay is required for murder to occur. Murder in the family evolves in a sequence: a background of perpetrator and victim bound to each other; a middle phase of mounting tension in their relationship; a homicidal phase culminating in a death; and a restoration phase, in which the perpetrator reintegrates his personality.

For a murder in the family to occur, then, the perpetrator and the victim first must be bound together by continuous emotional interaction in the immediate physical presence of one another. The intensity of the interaction depends on continuity in time and proximity in space. As each of the pair progressively invests in the partner and withdraws from other people, the relationship becomes both possessive and exclusive. Social isolation occurs as the two exclude others from their emotional interaction and as others, sensing danger, avoid the highly charged, incomprehensible relationship between the pair. The circle closes as the intensity of emotional interaction between the partners increases and as other interpersonal relationships, which could modify the symbiosis, lose significance. Resentment develops as each partner begins to feel cheated, convinced that he is giving more than he receives. Increasing resentment leads to efforts by each to alter the exclusiveness of the relationship, but the degree of emotional entrapment and the established social isolation hinder the sought-for disentanglement. Most persons who kill family members have previously tried, and then abandoned, nonviolent efforts at extricating themselves from an intolerable situation. Sometimes society forces reunion of the pair, as in the case of the child who flees from home.

In the middle phase of the process, the murderer and his victim, locked in continuous emotional interaction, experience escalating tension in their relationship, which they can neither endure nor give up except through the death of one of the pair. In the majority of cases (Tanay, 1969), the act of homicide represents a resolution of events that developed in the preceding three days or so. Escalating tension causes crisis, but perpetrator and victim have been similarly intensely involved with each other in the past without lethal outcome. The question remains: Why does not a less destructive discharge of aggression once more partially resolve the crisis? The availability of a weapon is a highly significant factor. Especially where there is marked discrepancy between perpetrator and victim in physical or cognitive strength, the gun is a proverbial equalizer. However, since some type of weapon is always available, there remains the question of why the crisis can be resolved only by the death of one of the pair. The destruction of life is an act of intense intimacy. To kill another is to share in the most pivotal point of that person's biography (Wolfgang, 1969). In this sense, the killing itself irrevocably locks the killer to his victim. It both

fastens and severs the ties that bind. The killer preserves forever his *intrapsychic* relationship with the victim, while destroying the interpersonal one. The death of one of the pair affords a permanent solution to the conflict experienced by the killer, who could neither tolerate nor otherwise terminate the bond.

Despite the background of an existing symbiotic relationship between perpetrator and victim, maintained until death, the homicidal act itself occurs because of the perpetrator's defective control of his destructive aggressiveness. Multiple determinants of this defect in control have been described earlier in this chapter. Any or several of these determinants may operate in a given case of homicide. The person with language disability, for example, may kill a family member because, confronted by escalating crisis, he cannot utilize a verbalized thought process to select behavioral options. His impulses dictate his actions, and he relates to others in interchanges of actions—interchanges that amount to power struggles. His actions limit the responses of others to reactions to *his* actions, bypassing thought and reasoning (King, 1975). Words that accompany such power struggles are terse, action-loaded, assaultive, or provocative—inevitably precipitating further action. Action belatedly ceases when the enemy is dead. One adolescent murderer said, "I shot him to put him out of action and I reloaded the gun to keep him out of action."

Finally, through the violence of his homicidal act, the killer confirms his own separate existence and forcefully impresses this now valid existence on others. The act itself restores the killer's psychic integrity and identity. Neuropsychiatric examination of the killer after the murder may reveal that he suffers from epilepsy, mental retardation, or psychosis. However, in many cases the killer demonstrates none of these conditions. He is legally sane, capable of understanding the charge against him and of cooperating with an attorney in his own defense. With surprising composure he may describe his relief that the deed is done, offering justifications and seeking from others validation of his justifications. Medical examiners commonly consider these data to be evidence of the offender's lack of guilt or remorse.

Yet reexamination of the offender at a later date provides different data. His complacency fades, replaced by concern regarding his legal predicament. Still later the offender experiences the gradual emergence of feelings of desolation. The loss of the victim, on whom he was so dependent for emotional

stimuli, deprives his life of meaning. Self-destructive tendencies may appear in the killer who earlier seemed devoid of conscience. Clinical depression is usually apparent, despite the offender's defenses against depressive affect. His defensive efforts may include outbursts of assaultive behavior as hopelessness again generates destructive aggressiveness that is inadequately controlled.

Thus does the offender's clinical course after the homicidal act recapitulate the process that earlier led to murder. This ominous process requires interventions to alter the offender's defective control of his destructive aggressiveness.

### Treatment Considerations

The offender requires institutionalization for the protection of both himself and society. Until he can establish self-control, his behavior must be controlled externally in the context of interaction with nonpunitive persons, who nevertheless refuse to validate the offender's justifications for assaultive acts. Such persons will not permit the offender to substitute action for thought or to manipulate others into a position where they can only react to his actions. Further, the offender must learn to think and reason. Unfortunately, few prisons offer programs that meet these requirements. Psychiatric hospitals with trained staff could provide such a program, but they usually lack a secure facility and personnel who can and will continuously control the offender's behavior. Prison staffs may be too punitive; hospital staffs may be too permissive or may lack enforcing authority. In all cases treatment for either a psychotic process or an affective disorder should be concomitant with rather than a substitute for interventions that instill controls in the offender. According to our experience, treatment—regardless of where it takes place or what modality is used—must correct the offender's defective control of his impulses. If he does not acquire impulse control, he remains potentially physically assaultive and homicidal. Although he is unlikely to kill again, this is by no means certain.

# Women Who Kill

*Alan Blum  
Gary Fisher*



Historically, simplistic explanations of women who murder—explanations reflecting stereotyped views of women—have been put forth. Only in very recent years, with feminism having its effect on the social sciences, has the oversimplified, sexist portrayal of the woman murderer been questioned and a more penetrating analysis, which eventually may do justice to the multitude of issues involved, been undertaken. In the past the field was dominated by popularized “true” accounts of female criminals (the case history approach). Reflecting and reinforcing our culture’s conception of the murderess as fascinating and mysterious, these accounts have focused on the more heinous, bizarre crimes of women, replete with sensationalism. The biased, sensational, moralistic, stereotypical, sexist flavor of these accounts is pervasive: “Moreover, women who murder are apt to have the motivation of sex at the time when the flame is



burning so brightly that passion rides high in command" (Sparrow, 1970, p. 156). "The characteristics one may expect to find in criminal women are vanity; dishonesty; craftiness; sensuality; a violent temper; contradictory religious tendencies; a capacity to lead a double life; and the tendency to place themselves in torturous situations" (Huggett and Berry, 1956, p. 43). "Among the insects, the female of certain species is more deadly than the male; among human beings, her poison is of but equal potency, but when she chooses to use it, the victim is caught unaware, for her sting is well concealed" (deRham, 1969, p. 337). The sexism is endemic and calls for closer examination. The presuppositions so blatant in these accounts are characteristic of much of the literature on women murderers, though they are usually expressed more subtly outside the genre of case histories.

There are primarily two interrelated aspects to the sexist portrayal of women murderers. First, sexuality is seen as the root of female behavior, female murder in particular; and references to a particular woman murderer's "hypersexuality," "overexcitability," "virginity," or "excessive masculinity," as the case may be, are common. The obvious social, economic, and situational factors involved in a specific murder often are overlooked or given secondary importance, to be overshadowed by sexual causes. References to woman's supposed inherent deceitfulness (regarding the hiding of our murders) also are common. *The Criminality of Women* (Pollak, 1950), a classic in the field, utilizes this argument. Though this book is more sophisticated than the case histories quoted from and does provide factual information, Pollak's excessive concern with the "hidden nature of female crime" leads him to make some curious causative explanations for woman's deceitfulness based on the nature of her sexuality: "Man must achieve an erection in order to perform the sex act and will not be able to hide his failure. His lack of positive emotion in the sexual sphere must become overt to the partner, and pretense of sexual response is impossible for him, if it is lacking. Woman's body, however, permits such pretense to a certain degree and lack of orgasm does not prevent her ability to participate in the sex act" (p. 10).

The second and more basic aspect of the sexism that underlies much of the literature is the dichotomy of women in general into "good" versus "bad": our cultural polarization of women as either "mothers" or "whores," "the gentler sex" or "the more deadly species." According to this schema, those

who conform to the idealized attributes of "femininity"—gentleness, purity, passivity, maternity—would never murder someone. Murderesses are, by definition, deviant and bad, since they have abandoned their "natural feminine roles." These women, then, have not merely killed another human being; more significantly, they have "betrayed their womanhood": "The criminal woman is . . . a monster. Her normal sister is kept in the paths of virtue by many causes, such as maternity, piety, weakness, and when these counter influences fail, and a woman commits a crime, we may conclude that her wickedness must have been enormous before it could triumph over so many obstacles" (Lombroso and Ferrero, 1897, p. 152).

Burkhart (1973) insightfully shows how this dichotomy directly affects women who have committed a crime. At first it apparently prejudices police, judges, and juries in favor of leniency toward women. Considered less dangerous and somehow "sacred" (the "good"), they are less likely to be arrested or convicted (and less often given capital punishment). However, a woman who has stepped far enough out of line to be convicted (the "bad") is no longer protected. Women who are caught and sentenced are often subject to additional disdain and abuse, often scorned as "tramps," "toughies," "loose," basically as "anti-mothers." The notion of "anti-mother" is probably at the root of the moral self-righteousness and vindictiveness with which some writers speak of women murderers. Shakespeare provides us with some enlightenment on the subject in his portrayal of Lady Macbeth—one of the rare classic murderesses:

*I have given suck, and know  
How tender 'tis to love the babe that milks me:  
I would, while it was smiling in my face,  
Have plucked my nipple from his boneless gums  
And dashed the brains out*

A devastating image indeed, for all of us who have (had) mothers.

The sexist explanations for female murders also possess another inadequacy: they generally presuppose an "individual-pathology" approach to violence. That is, they postulate a "pathology" (particularly in the sexual realm) in the individual to account for the murder. Although murder admittedly is uncommon, those who overemphasize its deviant character and view it apart from its social context present us with a very

limited view. It is undoubtedly comforting for nonmurderers to see murder as an isolated, perverse act; however, this view is not only limited but actually quite unhelpful. What is neglected is the fact that physical violence is a regular and standard feature of American society (and others, of course) and is inculcated and quite prevalent in the family setting (Gelles, 1974). In fact, murder by women is most common in the family setting. Violence is patterned and regular; not a series of isolated incidents. Murder is an extreme form of violence and must be understood in this context. Furthermore, there are "subcultures of violence" (Wolfgang and Ferracuti, 1967) within a country. In these subcultures violence, including murder, is much more common; the socialization process, the value system, and the interpersonal relationships of the individuals in the subculture are fraught with violence. Lower-class, 20-year-old American males are a case in point.

The individual-pathology model ignores race and class issues; its use in this field has produced writings that might be said to have a racist flavor. Focusing on the sexuality and psychopathology of the individual murderess makes one lose sight of the fact that most of these women are poor and Third World women, living in very specific socioeconomic situations, exposed to very specific frustrations and specific options (Klein, 1973). Burkhart (1973) is the one author whose case histories show an awareness of socioeconomic and racial issues. Her "cases" read true; these murderesses (and other criminals) sound like real people who were involved in very real and often very difficult situations, responding in a way that "makes sense" given the context. Hartman (1977) is the only other author whose case histories seem real; but her focus is on "respectable," upper-middle-class Victorian murderesses. While her focus gets us away from racial and poverty issues, it does provide a context for understanding these Victorian ladies—seeing them not primarily as perverse, pathological deviants but as women responding to various social pressures and contradictions in a changing society.

Now that we have been sufficiently critical of the literature, it is time to present the facts that are known about women murderers. First, it is clear that men substantially outnumber women in the arena of murder. In 1970 in the United States, only 15.4 percent of all persons arrested for murder or manslaughter were women (Hoffman-Bustamente, 1973). While the rates vary from country to country, in every reported case men

are significantly overrepresented. Pollak (1950), however, challenges these figures, pointing to what he considers the "masked nature of female crime." That is, he proposes that women "get away with murder" more often than men do. Women have traditionally utilized poison more frequently than men have, and poison is a more concealed approach; women also are overrepresented in terms of killing their own infants, another type of murder that perhaps may be more concealable. However, Pollak's argument is not very convincing here. Perhaps the actual number of murders by women is somewhat higher than reported (relative to men), but it seems evident that women have not murdered as frequently as men. An explanation for this is not hard to come by. Females are socialized to be less aggressive, are more closely supervised, and are more strictly taught to conform to rigid standards, whereas males are rewarded for aggressive behaviors. Role models for aggressive behavior abound for men; cowboys, football players, policemen, as well as television and movie figures, portray violent behavior, including murder, in certain contexts in a positive light. Such role models are lacking for women; in our literary tradition, comparatively few women murderers come to mind. Finally, women are also generally more restricted in the sphere of activities open to them and (until recently) in the types of encounters they have.

That this cultural explanation is reasonable can be seen from supportive evidence. First of all, the female crime rate (and murder rate) shows a tendency to approach closer to the male in countries where females have the greatest freedom and equality, such as Western Europe and the United States, and to vary most from the male rate in countries where females are most closely supervised (Hoffman-Bustamente, 1973; Sutherland and Cressey, 1974). In Algiers, for example, the male crime rate is 2,744 times that of the females. Second, the sex ratio appears to vary with the social position of the sexes in different groups within a nation. In the United States, for example, the sex ratio for crimes is less extreme among blacks than whites (Pollak, 1950; Sutherland and Cressey, 1974), possibly because black males and females more closely resemble each other in social standing than do white males and females. Finally, the sex ratio for crimes also appears to vary with time. Today, with an increasing variety of roles opening to women, with greater equality and fewer restrictions, their criminal violence might be expected to increase. Police reports in the United States indeed

indicate that violent crime by women is definitely increasing at a faster rate than that for men (Hoffman-Bustamente, 1973; Sutherland and Cressey, 1974). In addition, in war years, when women take over the occupations of men and in other ways approach social equality with men, the female crime rate increases substantially (Pollak, 1950; Sutherland and Cressey, 1974).

The second striking fact about female murders is their intrafamily setting. While murder in general is a very personalized crime, in the vast majority of cases taking place between people who know each other, female murder appears to be an especially intimate act. That is, women are more likely than men to murder another family member—particularly a husband or child; outside of husbands and children, the only other significant choice for women appears to be a lover. In his study of homicide in Philadelphia, Wolfgang (1958) found that women had killed their husbands in 45 percent of the cases (of women offenders), whereas men had killed their wives in 12 percent of male offender cases. Rosenblatt and Greenland's (1974) study in Ontario, Canada, showed that less than half of the victims of the men were family members, while almost all of the women's victims were family members. This family quality is understandable; since women have tended to spend a great deal of their time at home, their interactions have been confined largely to family members. Women are less likely to be involved in bar-room brawls, for instance, since they are less likely to be in such bars. Economic motivation for violence and murder (leading to less intimate victims) has also been less likely for women, who until recently have been discouraged from actively participating in "breadwinning" roles.

The third point of information regards the setting and type of weapon. In accord with the last finding, it is not surprising that a domestic setting is paramount for female violence, while male murders are more commonly street occurrences (Lester, 1973b). But even confining ourselves to domestic killings, we find differences between men and women. Women are most likely to kill their mates in the kitchen with a knife; men are most likely to kill their mates in the bedroom by a variety of methods (shootings, knifings, beatings) (Lester, 1973b; Wolfgang, 1958).

As far as age is concerned, women apparently become murderers at a somewhat older age than men typically do (Pollak, 1950; Rosenblatt and Greenland, 1974). Although the precise statistics vary from country to country, a consistent trend

can be seen: a pronounced delay in the rise, the peak incidence, and the decline of the crime rate for women relative to men. A probable explanation for this finding centers on the greater protection, supervision, and restriction of girls in our culture—with maturity bringing to women some broadening of autonomy, sphere of activities, opportunities, and temptations.

Finally, we come to a most interesting and controversial “fact” about women murderers: they tend to be seen—by prison psychiatrists and wardens and others—as more disturbed than their male counterparts (Eysenck and Eysenck, 1973), as well as more difficult to handle. There appears to be much “evidence” in support of this notion. Eysenck and Eysenck (1973) compared male and female prisoners and found that the females had higher scores for psychoticism (P scores); in contrast, male controls had higher P scores than female controls. Psychoticism on the Eysencks’ scale appears to be related to psychopathy, including criminality. The Eysencks concluded that female prisoners are psychiatrically ill to a more marked degree than male prisoners—perhaps because “crime is so unusual an activity for women that only the most unusually high P scorers overcome the social barriers involved” (p. 695). Panton (1974), using Minnesota Multiphasic Personality Inventory (MMPI) profiles of male and female prisoners, reached similar conclusions. Finding high psychopathy (Pd) scores for all—with males higher on hysteria (Hs) and depression (D) and females higher on social introversion (Si) and paranoia (Pa)—he concluded that male prisoners are more antisocial and sociopathic, with some neurotic overlays, and that females are more asocial and have greater emotional disturbance; that is, he saw the men as more “criminal” and the women as more “mentally ill.” Studies of parents who have killed one of their children are also supportive. In reviewing the literature on filicide, Resnick (1969) found that mothers who had killed a child were most frequently diagnosed as schizophrenic, whereas fathers were most often judged “nonpsychotic.” Similarly, in his study of filicide, Myers (1970) found that fathers were typically judged sane and sent to prison, whereas a majority of mothers were judged to be psychotic.

All this “scientific evidence,” however, raises more questions than it answers. A study by McGlynn, Megaw, and Benson (1976) is illuminating. College students were read a summary of a case of a violent murder in which an insanity plea was entered, with the sex of the hypothetical defendant varying. Interest-

ingly enough, the subjects saw the female accused of a violent crime as more "sick" than an equivalent male; that is, women were more often seen as "insane," even though the murder and the background information were the same. Thus, are women murderers really more "disturbed," more "insane," or are they judged to be so by others? It is impossible to sort it all out at this point. Clearly, there are different standards of mental health for women versus men. McGlynn and his colleagues point to previous studies that support this view; that is, where traits such as dominance and aggression were considered (by mental health professionals and college students) healthy for males, whereas the opposite traits of passivity and submission were considered healthy for females. Chesler (1972) has much to offer on this subject. Her thesis is rather complex but essentially speaks to the contradictions and complexities of the issue at hand. Not only are there differing standards of mental health for the two sexes, but each sex is encouraged into differing patterns of deviance. Women who are socialized "too well"—who incorporate the cultural ideals of femininity too completely, displaying much passivity, helplessness, feelings of inferiority, seductiveness, and so forth—end up being considered "neurotic" (most often "hysterical" or "depressed"). Men who display "masculinity" "too well"—who flaunt their strength and aggressivity—often end up incarcerated as "criminals" or "sociopaths." "The kinds of behaviors that are considered 'criminal' or 'mentally ill' are sex-typed and each sex is conditioned accordingly" (p. 57). Women are, in a sense, socialized into the help-seeking role of psychiatric patient, into thinking of themselves as "mad" or "neurotic," and are often judged by the psychiatric profession (which is very much dominated by males) as "mentally ill." Men, in contrast, are more often judged to be "criminals" or "sociopaths" and are less inclined to participate in the help-seeking role of psychiatric patient and less likely to see themselves as "mentally ill."

Women who murder are clearly deviating more from the "norm" than their male counterparts and are thus judged to be more "disturbed." They may also feel more disturbed, since they have less social validation for their action, but current evaluations of mental disturbance seem to confound the issue. The writings and studies reported are replete with biases that go unquestioned. Fathers who kill their children are seen as enraged as a result of provocation—as engaged in responsible albeit criminal action. Mothers are "invalidated"—their acts seen as a prod-

uct of "mental illness." Adolescent delinquent girls are seen as oversensitive, resentful, and inferior, while delinquent boys are said to be demonstrating a need to be independent. Perhaps women who murder *are* more "disturbed"; but a much more sophisticated analysis, sorting out the multitude of preconceptions and controversies, is in order before this conclusion can be reached.

Having presented much of the information known about women murderers in general, we turn to some more specific information about a subcategory of murderesses: women who kill their own children. This area deserves attention, since it is evidently more common than might ordinarily be suspected. In 1966 one out of twenty-two murder victims in the United States was a child killed by his own parent (Resnick, 1969). Resnick distinguishes two types of child killing: the killing of a neonate within the first few hours of life (neonaticide) and the murder of a child who is more than a day old (filicide).

Filicide is committed twice as frequently by mothers as by fathers (Resnick, 1969). Fathers tend to use more active methods, such as striking, squeezing, or stabbing, whereas mothers more often drown, suffocate, or gas their victims. A large number of the victims are killed during the first six months of life, presumably as a result of maternal postpartum psychoses. The motivation for this type of murder is an important factor distinguishing it from other homicides. Almost half of the filicides involve an explicit altruistic motive; that is, they are performed to prevent the child from suffering. The suffering may not always be real (the mother may be delusional, for example) and occasionally may be anticipated (for example, after the mother's intended suicide). In contrast, neonaticide is an almost exclusively maternal act; nearly all the neonaticidal murderers are mothers (Resnick, 1970). As a group, these mothers tend to be significantly younger than the filicidal group. Comparison of the diagnoses of the two groups suggests that neonaticide and filicide are committed by two different psychiatric populations. Depression, psychosis, and suicide are much less common in neonaticidal mothers. The murder of a neonate is much less often seen as a product of mental illness; its most common motive appears to be that the child was unwanted, either illegitimate or the result of an extramarital affair. The neonaticidal mothers are typically seen as passive and immature—the murder being a desperate attempt to deal with a situation they had made no plans for. The pregnancy is often denied and hidden



until too late; typically, no effort is made to obtain an abortion (Resnick, 1970).

The subject of abortion raises a number of relevant issues. In recent years the idea of abortion as murder has received attention. Whether or not it is seen as murder depends on one's values and frame of reference. As we saw the relativism regarding the standards of mental health and forms of deviance, we can see it here regarding the very definition of murder. Furthermore, the judgments placed on women who have had abortions have also changed relative to the times. Years ago abortion was taboo: an antifamily action for a married woman, and revealing of sinful (sexual) behavior for an unmarried woman—thus, probably the product of “mental illness.” At present, with the roles of women changing, as well as our ideas about the family, it is unlikely that the mental health profession would consider it an act of illness. On the contrary, the neonaticidal mother is now depreciated (seen as immature and passive) for not considering abortion.

So far, we have been critical and questioning of the findings about women murderers. We have been particularly attentive to the sexism and the drawbacks of a psychopathological model. The tendencies to overemphasize the woman murderer's deviance and pathology have been explored in numerous areas. The difficulties and biases of psychiatric diagnoses have also been touched on. Bearing all this in mind, we can now end with a psychodynamic study of “women who kill.” While it certainly has many of the limitations discussed throughout this chapter, it also is a significant contribution to the field. It is an attempt to explore the personality styles of murderesses—trying to find some common psychodynamic patterns that lead to the act of murder by women.

Cole, Fisher, and Cole (1968) did psychiatric evaluations of female homicide cases in California, developing a categorization based on personality style. They found six distinct groups of murderesses. The “masochistic” woman is described as stable, well controlled, and productive, though tending to choose an abusive, unstable mate. After years of abuse, she suddenly commits violent murder—often while being beaten or while fearful of being killed herself, using a weapon handy at the time (not premeditated). The “overtly hostile” woman is emotionally unstable, aggressive, and impulsive, with a history of violence and antagonism to authority. She characteristically attacks her victim with the intent to hurt but not kill. The

"covertly hostile" murderess is usually not violent in general but murders violently. She fears the expression of hostility but tends to choose abusive mates. Her general functioning is usually poor, and she often kills her children. The "psychotic" woman killer murders while disturbed. She has a history of psychosis. She often does not recall the offense and expresses no remorse. The "amoral" woman kills deliberately for economic gain or to remove an interfering person. She has a history of antisocial behavior. Her intellectual level and level of functioning are generally high, but she shows a marked disregard for the feelings of others. The "inadequate" woman has little coping ability and depends upon a dominant male to take care of her. She typically kills in response to being ordered to do so by her partner. "It is, of course, clear that women of totally diverse personality style do commit murder" (p. 7).

We conclude this chapter by noting that a dynamic process is occurring. As the role of women in society is changing, our understanding of women—including our understanding of female murderers—is also changing. With the rise of feminism, stereotyped, one-dimensional views of women are being questioned, and a more searching examination of the complexities of what it is to be a woman (and woman-murderer) is being undertaken. In addition, the rise of feminism has led to an increased participation of women in professional roles; their increased involvement as social scientists will inevitably broaden and deepen the understanding of women. Interestingly, the most recent and enlightening studies of women murderers have been done almost exclusively by women (see, for example, Hartman, 1977; Hoffman-Bustamente, 1973; Klein, 1973). Questions are being raised; and the exotic, sexist, oversimplified views of murderesses are being challenged. The result can only be a more penetrating understanding of the complexities of the subject.

# Assassins

*Irving D. Harris*



There seems little doubt that assassination must be reckoned with as a distinct possibility in American political life. Much has been written about the dangers to the candidates, the strains on the election process, and the desirability of the gun laws. Thus, no belaboring is necessary. But what can be fruitfully explored, I believe, is the psychology of the assassin and the political-social climate that supports his or her deed. Although these matters have been the subject of study, the studies have tended to concentrate somewhat narrowly on the features of mental derangement in the assassin and, consequently, have not provided a satisfactory profile for the detection of the more normal and therefore less easily detected assassin.

A version of this chapter was published in *Psychology Today*, Oct. 1976, 5, 48-51, 103-104.

We might make a start toward a new profile by recognizing the relationship between assassination and its close and more normal cousin, tyrannicide. Whereas the former has come to have an evil connotation, the latter—the killing of an authority figure who wields power despotically and arbitrarily—is generally considered quite praiseworthy. Thomas Hobbes in 1650 put it thus: “Tyrannicide—that is, the killing of a tyrant—is not only lawful but also laudable.” In 1790 David Hume similarly noted: “Tyrannicide or the assassination of usurpers and oppressive princes was highly praised in ancient times.” A more modern view has been expressed by the conservative columnist James J. Kilpatrick, commenting on the Senate report on CIA assassination activities. In his column of December 1, 1973, headed “Is Tyrannicide Morally Justified?” Kilpatrick concludes: “If it had been possible to arrange the murder of Hitler in, say, 1938, and thus to have averted the fearful consequences of his madness, would this have been a moral act? My own feeling is that in the dangerous world we live in, our leaders must occasionally think unthinkable thoughts and in the overriding possibility must not flinch from doing the unthinkable.”

Tyrannicidal thoughts, then, are clearly normal and even, to some, deserving of praise. What is more, they are distinctively if not uniquely American. As we were reminded by the bicentennial, this nation began when in the course of human events it was necessary to throw off the yoke of what was considered to be despotic authority. This American ethos has made it almost unpatriotic not to be against tyrants, and it has served as the first refuge for the rationalization of the assassin. It is no accident, I shall suggest, that “*Sic Semper Tyrannis*,” the phrase declaimed by John Wilkes Booth after he shot Lincoln, is also the motto of the state of Virginia and no accident that the United States ranks very high compared to other nations in the frequency of political assassination.

With America becoming more antagonistic to authority and hierarchy and more sympathetic to oppressed minorities, there would tend to be an increase in the number of persons who approve of tyrannicide—an increase which, by extension, could enlarge to some degree the number who approve of assassination. If these persons are to be detected, it becomes necessary to develop a profile that takes into account their characteristically adverse reaction to authority and hierarchy. Such a profile must be extended to explore beyond psychopathology to the much more normal psychology of what may be called the

rebellious-rivalrous personality. The rebellious-rivalrous individual is someone who finds authority and restrictions irksome and strives for a redistribution of hierarchical status by competing with the successful limelighted rival; if driven to desperate extremes, such an individual will resort to assassination as a way of deposing the authority and rival.

In what way, it may be asked, does this new view of the assassin differ from the previous view—or, to be more specific, from the psychological profile that the Secret Service has relied on since the assassination of President Kennedy? It is difficult to answer this question with any exactness, since the Secret Service, understandably, has not publicized the detection procedures used by its protective research section. Perhaps it uses not just one profile but many. This possibility is suggested by the fact that the Secret Service has no single “house psychiatrist” to coordinate psychological research but, instead, farms out such research to various consulting groups, a policy that could easily result in a variety of profiles. However, from information in the public’s possession (as conveyed in a popular article by Shearer, 1975), it appears that the Secret Service does rely on *one* profile. In this article, which appeared shortly after the back-to-back attempts by Lynette Fromme and Sarah Jane Moore to kill former President Ford, Shearer first points out that assassinations are the work of “disgruntled abnormals” who, like Fromme, are almost impossible to detect and restrain. Then, describing the work of Secret Service agents, Shearer writes that they “study the profile of the typical assassin. They read the reports of the President’s Commission on the Assassination of President John F. Kennedy [the Warren Commission]. They consult the high-priority files which are maintained for individuals considered major security risks . . . but they are not psychiatrists and the behavior patterns and thought processes of the mentally disturbed are incalculable, which under the present set of ground rules makes the job of protecting a United States president far less than a certainty” (Shearer, 1975, p. 6).

What is this report that the agents read and this profile that they study? The report is the thick Volume 8 of the staff’s report to the commission, which, *if* thoroughly read, would provide much psychological understanding of the assassin’s mind, an understanding that has some elements in common with the view to be presented here. The Secret Service agents may fashion their profile from such industrious reading, or, if pressed for time, they may lessen their task by using a short article written

by Lawrence Freedman, the psychiatric consultant to the staff. This article, which will be referred to later, is rich in psychological sensitivity and if read and understood would provide, in my opinion, a useful profile for the agent. More probably, however, the profile that the hard-pressed Secret Service relies on is a rather terse one, comparatively devoid of psychological nuances and motivation. It is the report's summary-profile, which describes the assassin as "short and slight of build, foreign born and from a broken family—most probably with the father either absent or unresponsive to the child" (Shearer, 1975, p. 6). If, as Shearer states, the agents indeed are not psychiatrists (or psychologists), they would find this terse profile most appealing; it is easily committed to memory, it deals almost entirely with hard facts rather than qualitative impressions, and it requires of the agent little or no psychological flair. This profile may be additionally attractive in that it helps the Secret Service comply with one of the recommendations of the Warren Commission; namely, that they render their manually maintained files (50,000 in number) usable for automatic data processing. In such a computerized operation, top priority is necessarily given to the hard, quantifiable yes-or-no facts: height, weight, place of birth, and the like—facts that hardly do justice to the imponderables of the assassin's mind and consequently are of little help in protective research.

In our study of these matters, we use a methodology somewhat different from that employed in the staff report. We pay more attention to actual assassins than to possible ones (such as people who crash the White House in order to talk to the president). In addition, we do not limit our investigations to presidential assassinations but include the assassins of Robert Kennedy and Martin Luther King and the assailant of George Wallace. Apart from these differences, the methods are those customarily employed by depth psychologists: a study of behavior, personality, and formative background of the assassin.

A word is in order about our aim. We have tried to develop a profile that is specific for the assassin. Therefore, we do not stress mental derangement or emotional disturbance, phenomena common to a multitude of conditions. The goal in mind has been to identify a core psychology peculiar to assassins and not as characteristic of other perpetrators of violence (for instance, the terrorist, the skyjacker, the paid killer, the kidnapper, the sadist, the vigilante, and the genocidist).

To be sure, the main features of this core psychology—

the characteristics of the rebellious-rivalrous personality—are not unknown to those who have studied assassins. They are alluded to, for example, in the first and third of the five characteristics of Lee Oswald listed by the Commission on Violence (U.S. President's Commission, 1964): "his deep-rooted resentment of all authority, which was expressed in a hostility toward every society in which he lived" (p. 23) and "his urge to try to find a place in history and despair at times over failures in the various undertakings" (p. 42). The other three factors (inability to enter meaningful relationships, capacity for violence, commitment to Marxism and communism) are much less specific and are clearly not pathognomic of the assassin.

Freedman (1966) refers to the rivalrous bid for status and fame, along with characteristics of being "loveless, lonely, hating, frustrated, psychiatrically and socially alienated, and uncoordinated." However, he does not emphasize that the hatred is particularly directed toward authority. The flavor of his views may be gained from the following:

The assassins of American presidents have been emotionally disturbed social isolates. . . . [Charles] Guiteau [who killed Garfield], [Leon] Czolgosz [who killed McKinley], and Oswald lived chaotic, wandering lives, without discernible roots and with shifting goals. Neither in love nor in work were they able to avoid the sense of personal failure. Ambitious, out of proportion to their prospects, they were lonely and alienated from an immediate community of friends and sought their private solution in a massive assault on the head of the republic. . . . Excessive ambition [and] self-defeating self-doubts are, of course, not uncommon and, by themselves, would lead only to the life of quiet desperation which is the fate of most of us. The difference is partly quantitative—the range of ambition and the intensity of the felt need to achieve it and the depth of self-loathing which made even modest achievements impossible [pp. 34-35].

As mentioned, Freedman stresses the overambitious rivalry arising from impaired self-worth more than he does attitudes toward authority. He does, however, refer to the latter in

a brief sentence dealing with the fact that assassins frequently have alternative targets; that is, if they cannot kill one prominent figure, they will kill another. The sentence reads: "These targets share only their authority and celebrity with one another" (p. 36). It is in this succinct description of the targets—the authority to be rebelled against and the celebrity to be rivaled—that our view and Freedman's coincide. The difference in our viewpoints is somewhat ascribable to different emphases but more so to different scopes. Where Freedman tends to focus on the assassin's psychopathology, particularly in the period just before the assassination, our scope also takes in the normal versions of the rebellious-rivalrous personality and, more important, the family origins of this core psychology.

As for the roots of rebellious-rivalrous tendencies, it appears that a certain kind of early family experience predisposes a person toward this type of personality. This family experience places the child at some psychological distance from authority and, at the same time, in a low-man-on-the-totem-pole situation in the family hierarchy. One of the many sources for such an experience, one that operates with remarkable frequency, is the family position of "later son." This position appears to be conducive (and we stress conducive rather than deterministic) to the formation of the rebellious-rivalrous personality. When well integrated, the later sons who have this core psychology will find, as will be shortly described, highly constructive and creative outlets for their rebelliousness and rivalry. But when out of kilter, they tend to seek a particular kind of violent outlet: not terrorism, not sadism, not suicide, but assassination. Practically all the American assassins about whom family information is available and reliable have been later sons: John Wilkes Booth, Charles Guiteau, Leon Czolgosz, Lee Oswald, Sirhan Sirhan, and Arthur Bremer; such information is lacking about the assailants of Andrew Jackson (1835), Theodore Roosevelt (1912), Franklin Roosevelt (1933), and Harry Truman (1950). The one exception to this trend is James Earl Ray. However, little is known about his motivation in shooting King; in the absence of ideological undertones, he might perhaps be better classified as a "paid killer" rather than as an assassin. This list of later sons could be extended to include Jack Ruby if one interprets his televised killing of Oswald as motivated by a desire for celebrity. A still further extension is possible if one includes federal prisoners hospitalized psychiatrically because of threats made against a president. David Rothstein (personal communi-



cation, 1976) disclosed that the overwhelming majority of such prisoners whom he examined were the later sons of their families.

Just as the first son is often a successful achiever, the later son frequently finds himself overshadowed, the low man on the family totem pole, the tagalong, the kid brother. As a result, he tends to resent hierarchical structures that freeze him out; he resents superiors, particularly if they remind him of bossy, arrogant older brothers. His position is not unlike the second-team football player watching the game from the bench or the understudy watching the applauded star of the play. In these circumstances the second stringer might well have a conscious or unconscious wish distantly related to assassination, a wish that the first stringer would break a leg.

How does family position influence the style of aggression, the *modus operandi* of future violence? With the inequality of status, there is bound to be some aggressive struggle between brothers—the older striving to maintain his dominance, the younger striving to upset the pecking order. How do they operate in this struggle? The first son—as a substitute parent to whom the actual parents have delegated some disciplinary authority over younger children—is inclined to be as directly and frontally authoritative as his father is. In addition, since he is held to adult standards of fairness, consistency, and honor, he cannot easily stoop to conquer and is inclined to behave heroically and nobly. Finally, in order to realize the larger than life-sized aspirations of the parents, he prefers to do things the hard way, against odds. Climbing Mount Everest is not enough; he must do it with a hundred-pound pack on his back. These several factors explain why the frontal heroic style—with all its potentialities for collision—is more often found in first sons than in later sons.

The tactics of the younger brother are governed by different considerations. Not having had disciplinary authority delegated to him, he has not developed the coming-down-hard frontal approach. His smaller physical size operates in two ways. First, since the parents have enjoined the first son not to maim his smaller brother, the latter, given this protection and also not held to adult standards of noblesse oblige, is free to harass the older brother in many ways. Second, his smaller size does put him at a physical disadvantage in a frontal combat with the older brother. To survive, he must adopt indirect ways of aggressing, must wait for a weakness in the older brother and

then, with deception and surprise, literally ambush his older and stronger adversary. Finally, because his ambitious scope is smaller (due to less parental expectancy), he does not have to win the hard way, against odds, the way heroes do. It is enough that he just win. There is no additional distinction if he wins in a heroic Marquis of Queensberry fashion. For these reasons the indirect, devious style of aggression is found more often in later sons than in first sons.

Perhaps by now it is clearer why assassins tend to be drawn from the ranks of later sons. This one-down family position predisposes the boy to develop a rebellious attitude toward authority and tradition, a resentment against status inequalities, and a wish to redistribute status by competing with the successful rival or by weakening the power of authority. If these feelings do not find a constructive outlet, the soil is prepared for a shortcut to fame, for thoughts of assassination; and the *modus operandi* most often is the deceptive surprise of an ambush, the age-old tactics employed by the smaller against the larger.

Before going on to illustrations of these tendencies, we wish to anticipate possible misunderstandings. It may bear repetition to say that there is nothing inevitable or deterministic about family position. That being a later son predisposes one to rebellious-rivalrous tendencies says no more than, for example, the statement that being an Australian predisposes one to becoming a champion tennis player. Furthermore, though such tendencies are a necessary ingredient in the assassin's personality, they are not sufficient. To them must be added a goodly amount of personality disorganization and alienation, non-specific factors that bring the turmoil to a boiling point. Finally, it must be pointed out that the rebellious-rivalrous later sons do not have a monopoly on violence. Though the scope of this chapter prevents an elaboration of this point, the overestimated, overachieving first sons have as much potential for trouble-making as do the out-of-the-limelight later sons. But it is a different kind of mischief, one bred out of the first son's need to retain his early status and dominance and sometimes his need to legislate for the whole world and for all time. In its most extreme form, it can result in a wholesale blood bath: the Reign of Terror under the first son Robespierre; the final solution under the first son Hitler.

To put flesh on this schematic presentation, we need specific examples from the continuum between the constructive and integrative rebellious-rivalrous personalities, on one hand,

and the destructive, poorly integrated ones who resort to assassination, on the other.

It is from the comments of eminent later sons that we can get flavor of the effect of their family positions. Despite the personality strengths that won eminence for them, and despite the many years elapsed since childhood, they remember as if it were yesterday how it is to have an illustrious older brother. We might begin with second son John F. Kennedy's self-appraisal. In his congressional candidacy, he often compared himself with his eldest brother, Joseph, and confided, "I'm just filling Joe's shoes. If he were alive, I'd never be in them." And later, after narrowly losing the vice-presidential nomination, he commented, "Joe was the star of the family. He did everything better than the rest of us" (Whalen, 1969, p. 338). A similar theme appears in the remarks of Alfred Adler, the depth psychologist, who coined the term *inferiority complex*. According to his biographer (Bottome, 1957, p. 27), "Adler felt himself put in the shade by a modest eldest brother who always seemed to Alfred to be way far beyond him in a sphere to which Alfred, for all his efforts, could never attain." In Adler's words: "My eldest brother is a good, industrious fellow; he was always ahead of me and, for that matter, he is still ahead of me."

The feelings of later sons about their self-worth can be better appreciated if contrasted with those of first sons. Sigmund Freud, for example, had little or none of the overmodest self-appraisal noted in Alfred Adler. According to his biographer (Jones, 1953, p. 15), "The mother's pride and love for her first born left [an] intense, indeed indelible, impression on the growing son as he [Freud] wrote, 'A man who has been the indisputable favorite of his mother keeps for life the feeling of conquerer, that confidence of success which often induces real success.'"

A similar investment of mother in her first son appears to account for much of Lyndon Johnson's high self-appraisal. In recalling his birth, his mother wrote, "Now the light came in from the East, bringing a dead stillness, a stillness so profound and so pervasive that it seemed as if the earth itself were listening and then there came a sharp impelling cry, the most awesome, happiest sound known to human ears, the cry of a newborn baby; the first child of Sam Ealy and Rebecca Johnson was discovering America" (see Farber, 1961, p. 7).

To compensate for the feeling of lesser self-worth, the rebellious-rivalrous individual must distinguish himself in some

way. Among the constructive solutions is that of performing a particular function in political-social life. This function, it appears, has been to attack and bring down unwarranted and unfair bigness, an attack that serves the goal of equalization of status. Since most of mankind relishes the toppling of the arrogant mighty, most of these attacks have received social and political support. A reading of history indicates that the vast majority of these attackers and topplers have been later sons of the mother. In the Old Testament, for example, we can note later son Jacob wresting the birthright from favorite son Esau (and also, in the process, contesting the father's authority). More to the point of social endorsement, note the praise given David, a seventh son, for smiting Goliath.

As for history proper, the European challengers of traditional power and authority—the revolutionary later sons Jean Jacques Rousseau, Giuseppe Garibaldi, and Nikolai Lenin—should be mentioned. Closer to home, the most dramatic example of rebellious fervor and inspiration was provided by Patrick Henry. Historians generally agree that the speech given by this later son was the single most powerful utterance sparking the colonies. But years earlier, Henry came close to figurative assassination, when he brought on cries of treason by hinting that George III might suffer the same fate as Caesar suffered at the hands of Brutus. In twentieth-century America, of course, no one has the tyrannical political power ascribed to George III. Yet, here too, later sons tend to be the principal foes of bigness: Justice Louis Brandeis and Ralph Nader against excessive corporate power, former Senator James Fulbright against the arrogance of presidential power.

Somewhere between the constructive attack on unwarranted bigness and the assassin's attack is one which is worked out, consciously or unconsciously, through the writing of fiction. This process can be seen in a rather stable personality like second son Henry James, in whose novels there is a recurrent theme of younger brother toppling older brother (Edel, 1953, p. 210). The process also can be seen in the much less stable Herman Melville, who was subject to considerable mental disturbance in his later life. In the view of his biographer (Arvin, 1957, p. 18), Melville was persistently rankled by having the lesser role of second son: "Doubtless she [Mrs. Melville] preferred the more brilliantly promising boy Gansevoort to his less taking younger brother [Herman]." In Arvin's view, Melville's own mother can be identified with the mother of Timophanes

and Timoleon, to whom Melville, in one of his poems, attributes these sentiments:

*When boys they were I helped the bent;  
I made the junior feel his place,  
Subserve the senior, love him, too;  
And sooth he does, and that's his saving grace.  
But me the meek one never can serve,  
Not he, he lacks the quality keen  
To make the mother through the son  
An envied dame of power, a social queen.*

This kind of residual rancor is most appropriate soil for a violent solution. Whether it found expression in Melville's literary works, whether there he achieved a subtle redistribution of status, is a matter best left to literary critics. Our own impression is that the downfall of Captain Ahab in *Moby Dick* might be viewed in this way and that, without doubt, the rebellious mutiny of the humiliated blacks and their massacre of the white officers in Melville's short story "Benito Cereno" contain the essence of the solution by assassination.

The actual use of this violent solution represents the extreme care of the attack on bigness. What drives the assassin to the extremes? What factor must be added to the rebellious-rivalrous personality to drive the person to this end point? These questions are difficult to answer definitely. There does seem to be generally a crisis in self-worth and self-image, a feeling of insignificance which must be compensated for. Sometimes, but by no means always, the lowered self-worth is proportional to a lowered station in life—as in the case of Arthur Bremer, who wandered restlessly; accomplished little; and, to retain friends, had to play the fool, to be the butt, to eat dog food. Often, however, the external signs of career failure are not blatantly obvious, and one gets the impression that the feelings of insignificance are directly proportional to the discrepancy between ambition and actual accomplishment. This seems to have been the case with Charles Guiteau and Lee Harvey Oswald, and especially with John Wilkes Booth, a most successful actor as measured by external criteria.

By dwelling momentarily on these three assassins, we can gain some idea of the crisis in self-worth that exists just prior to the act of assassination. For several reasons, we will give most attention to John Wilkes Booth. First of all, he was the most

successful presidential assassin. Next, there is no question of a "second gun" and no question that he was the pawn in someone else's plot; Booth was clearly the mastermind and chief actor in the assassination. Third, Booth, though obviously disgruntled about political matters, was not obviously deranged. Enjoying popularity and eminence on the stage, he seemed to fall within the limits of psychological normality and thus could be illustrative of the fairly normal assassin. Finally, Booth's rationalization—a political deed in behalf of a noble cause—is quite similar to the rationalizations (or reasons) offered currently by the disaffected and radicalized in their violent protests against the Establishment.

Booth, it will be recalled, came from a family prominent in the theater. His father, Junius, his eldest brother, Junius, Jr., and especially his next brother, Edwin (the second son), enjoyed much fame as actors—all of which provided the perfect soil for rivalry and frustration. According to Kimmel (1940, p. 149), this third and last Booth brother quite early was given to rivalry and to rebelliousness at restrictions, a consequence of having experienced few limits from his parents:

Little Johnnie, as he was called at home, had captured the center of the family scenes. To Edwin and his sister he was a troublemaker and a vexation, but to his father and mother he was an exceptional child whom they petted for his bright appearance and fiery temperament. They could not keep up with his pranks and he was allowed to run about like a wild young colt. . . . No member of the family had much influence over the impetuous Johnnie. His father was away on tours during most of his formative years. . . . [He] was extremely fond of his mother and she frequently forgave his ungovernable antics because of his gentleness toward her.

In his development as an actor, John Wilkes relied for success more on his natural talent than on the slower acquisition of skills that require patience and self-discipline. His impatience to be the center of the stage showed itself at the age of 8, when, according to Kimmel, "he often interrupted rehearsals by suddenly appearing at a window and mimicking the aspiring actors" (p. 20). He relied mainly on mimetic ability and on a

quick rather than a thorough study: "At rehearsal Edwin saw that Wilkes would be extremely difficult to direct for he did not easily follow instructions but centered his efforts on imitating the old bombastic actors" (Kimmel, 1940, p. 15).

Booth's lack of self-discipline did not interfere unduly with his rise to prominence as an actor. His natural talent, charm, wit, and personal magnetism sufficiently counterbalanced his lack; even with the benefit of hindsight, it does not seem that his impatience to get to the top or his fluctuations in feeling of self-worth were out of the ordinary for those in the arts or for one with an impetuous temperament. From another biography (Wilson, 1929), we learn how John Wilkes fared as an actor before he hatched the capture and assassination plots. These glimpses begin with Edwin's estimate of his 20-year-old brother as an actor: "I don't think that he will startle the world, but he is improving fast and looks beautiful on the platform" (p. 17). Then in 1850 a letter of Mother Booth to Junius, Jr.: "John is doing well at Richmond. He is very anxious to get on faster. When he has a run of bad parts, he writes home in despair" (p. 181). A retrospective opinion of the contrast between John Wilkes' less disciplined artistry and Edwin's more disciplined acting was supplied by Sir Charles Wyndham: "[John Wilkes] was a marvelous man. . . . His dramatic powers were of the best. They were untutored, untrained. He lacked the quality of the student that Edwin possessed, but the artist was there." Going on to compare the different versions of Hamlet, Wyndham writes: "Edwin's was a reflective Hamlet. As JWB played it, the Danish prince was unmistakably mad throughout" (pp. 15-16).

There is no distinct precipitating event causing a downturn in Booth's career and self-worth, nothing like the rejection that occurred in the cases of Guiteau and Oswald. He may have sensed that he did not have the staying power and depth to surpass or even hold his own with Edwin. This possibility is suggested by his reaction to being praised for his version of Hamlet. "No, no, no," he is said to have replied. "There is but one Hamlet to my mind, and that's my brother, Edwin. You see, between ourselves, he *is* Hamlet; melancholy and all" (p. 22). Then again, it may have been that his source of applause and income was cut off by the Civil War: "There was a saying in the dramatic world that Edwin Booth was supreme in the East and Junius Brutus Booth, Jr. in the West, but that JWB ruled the South" (Wilson, 1929, p. 39); thus, the loss of southern audi-

ences may have affected Booth considerably. In any event, the fact remains that, sometime after the outbreak of the Civil War, Booth's thoughts had turned toward tyrannicide, as evidenced by the following statement in his diary: "I am here in despair and why? For doing what Brutus was honored for and made William Tell a hero" (pp. 143-144).

When Booth wrote those sentences, he was very probably living through a particular sequence of psychological events which is characteristic for assassins. The first of these events is depression and despair over the low self-worth, over the comparatively poor figure one cuts in the eyes of others. The second in the sequence is an attempt to ward off this despair by seeking a new identity, a new self-image that commands attention and respect. Thus far the sequence is not only rather normal but in itself not peculiar to assassins. It is the third event that is the crucial differentiating one—an event that is potentially, if not actually, pathological, since it involves a departure from social reality. For the new honorific identity is not conferred and confirmed by society but rather by one's own self. In the process, the assassin becomes a self-styled hero rather than a social-styled one. In the privacy of his own reality, he goes further than pinning medals on himself; he acts as judge and executioner of hated power and eminence.

As noted, the first two events in the sequence occur frequently enough in the course of living that they can be considered "normal." Dissatisfaction with self can be remedied by self-improvement. One can achieve a new and more respected identity by changing his habits and improving his skills—measures that enable self-worth to be endorsed and validated by society. This seems to have been the course taken, for example, by Malcolm X during his crisis in prison. By adapting himself to the value system of the Black Muslims, he secured a new identity, which was conferred and confirmed not by himself but by the religious sect. But the assassin, probably because of his rebellious attitude toward authority and its standards, does not wish to change himself to meet society's expectations. By an exercise of the imagination, by the use of private self-inflations that go much beyond the transient Walter Mitty fantasies, he creates a new and dangerous self.

Much of what has just been described can be seen in a letter that Booth left with his sister some months before the assassination, when the plot was to capture rather than kill Lincoln. He begins by casting off the opinion and endorsement of



ordinary society: "Right or wrong. God judge me, not man." He then justifies his impending action, using the metaphor of aggression between brothers: "The very nomination of Abraham Lincoln four years ago plainly spoke war, war upon Southern rights and institutions. . . . In a foreign war, I too could say 'Country right or wrong' but in a struggle such as ours (where the brother tries to pierce the brother's heart) for God's sake choose the right. When a country like this spurns justice from her side, she forfeits the allegiance of every honest freeman and should leave him, untrammelled by any fealty so ever, to act as his conscience may approve" (Wilson, 1929, p. 5).

Although in private conversations Booth's need for a name forever famous in history was openly stated, in the letter it is indirectly indicated: "Their [the southerners'] causes since the war have been as noble and greater far than those that urged their fathers on. Even should we allow that they were wrong at the beginning of this contest, cruelty and injustice have made the wrong become the right and they stand now (before the wonder and admiration of the world) as a noble band of patriotic heroes. Hereafter, reading of their deeds, Thermopylae will be forgotten" (Wilson, 1929, p. 3). It is difficult not to see in this what many have already seen: that, by the act of capture or assassination, John Wilkes Booth sought to wrest the spotlight from his father and brothers.

Of the assassins after Booth, Charles Guiteau and Lee Harvey Oswald particularly illustrate the need for honorific identity and the use of the pathological mechanism of self-inflation. Guiteau, according to his biographer (Ridpath, 1886, p. 7), was a lawyer who "came to consider himself a great writer, a philosopher whose mission it was to change the face of civilization." He published pamphlets on "The Second Coming of Christ." He advertised his speech "A Reply to Infidelity" as an address of profound thought highly praised by the eastern press. The disappointment that set Guiteau off on the course toward assassination was his not being given an appointment in the foreign service—an embittering rejection, since Guiteau believed that Garfield owed him that much for a speech Guiteau had written in favor of Garfield's election.

While in prison, awaiting execution, Guiteau (1880) wrote a pamphlet, "The Truth and the Removal," explaining and defending his action. The obvious self-inflation speaks for itself. Due to President Garfield's "unwise use of patronage," wrote Guiteau, "the break in the Republican party was widen-

ing week by week and I foresaw a civil war. My inspiration was to remove the late President at once and thereby close the breach before it got so wide that nothing but a civil war could close it. . . . Why did [the Lord] inspire me in preference to some one else? Because I had the brains and nerve probably to do the work. The Lord does not employ incompetent persons to serve Him. He uses the best material he can find" (p. 116).

In Lee Oswald the self-inflation, though not as flagrant as in Guiteau, was nevertheless unmistakable and noted by many. The first signs of it were seen when Oswald, at the age of 13, was examined psychiatrically because of truancy. Previously a quiet, solitary boy who was never a troublemaker or a madcap, Oswald underwent a change in personality and behavior when he and his mother moved to New York to be near his older married brother. Teased at a Bronx junior high school because of his Texas accent, he "began to stay away from school, preferring to read magazines and watch television by himself" (U.S. President's Commission, 1964, p. 330). According to the psychiatrist Dr. Hartges, Oswald had "a vivid fantasy life turning around the topics of omnipotence and power, through which he tries to compensate for his shortcomings and frustrations" (p. 330).

During his six-month training period in the Marine Corps, Oswald's personality traits were sufficiently modulated that he was able to get a rather high rating in conduct and performance. During his subsequent service in the corps, small signs of rebelliousness and self-inflation were in evidence. Thus, although his officers and fellows considered him adequate in performance of duty, they also considered him "deficient in disciplinary matters and such things as barracks inspection" (p. 615). As for rivalrous self-importance, the following is revealing: "He was thought to be an intelligent person, somewhat better educated and more intellectually oriented than other men on the base. A few of them thought it more accurate to describe him as someone who wanted to appear intelligent. . . . He evidently enjoyed drawing others, especially officers, into conversations in which he could display his own superior knowledge" (p. 620).

Since Oswald did read quite a bit, his new identity as a knowledgeable person was not completely specious. Therefore, it took a perceptive ear to detect the semifraudulence in his presentation of himself. Thus, in Russia, where he tried to renounce American citizenship, he impressed one American Embassy officer quite favorably as "an intelligent person who

spoke in a manner and on a level which seemed to befit his apparent level of intelligence." However, as the report indicates, Priscilla Johnson, a correspondent who spent almost five hours talking with him, received a much less favorable impression: "He liked to create the . . . impression [that] he was attracted to abstract discussion . . . but it was like pricking a balloon. I had the feeling that if you really did engage him on this ground, you very quickly would discover that he didn't have the capacity for a logical, sustained argument about an abstract point on economy or on noneconomic political matters or any matter philosophical" (p. 701).

Johnson's estimate did, of course, prove to be more correct. When Oswald was not taken at face value, when the balloon was pricked by the Soviet Union's not accepting him for citizenship, he, in despair, made an abortive suicide attempt. This sequence is recorded in his diary: "I am shocked! My dream . . . I have waited for two years to be accepted. My fondes [sic] dreams are shattered because of a petty offial [sic] . . . I decide to end it all" (p. 711). As we know, however, Oswald made other attempts to secure a renowned public image. In the weeks preceding the assassination, the event that ended the life of a dream-shattering official, he told people that he represented the Dallas chapter of the Fair Play for Cuba Committee. As the staff report indicates, this chapter was nonexistent. "While Oswald publicly engaged in those activities, his 'organization' was a product of his imagination. . . . Oswald's Fair Play for Cuba activities may be viewed as a very shrewd political operation in which one man single-handedly created publicity for his cause or for himself. It is also evidence of Oswald's reluctance to describe events accurately and of his need to present himself to others as well as to himself in a light more favorable than was justified by reality" (p. 720).

Our principal purpose in calling attention to Oswald, Guiteau, and Booth has been to describe the pathological sequence of psychological events leading to assassination. Especially important is Factor X; that is, the unrealistic self-inflation which, when added to the rebellious-rivalrous personality, predisposes the person to assassination. Another purpose has been to indicate how difficult it may be for the untrained (or impatient) observer to be sure that Factor X is present. The successful assassins, unfortunately, are not flagrant in their grandiosity. They do not proclaim anything on the order of "I am Jesus Christ" or "I am Napoleon," nor do they futilely attempt to

crash the White House. The three assassins discussed were shrewd enough to enclose their intentions in socially palatable wrappings. Without this shrewdness (which is necessary for deception and ambush), it is doubtful that they would have been able to carry out the assassinations. To detect this shrewdness, and to perceive that there is little gold behind the glitter of self-inflation, may require more than the brief amount of time that those in government service can afford to spend in an interview. It may require either a great deal of psychological expertise or the five hours that Priscilla Johnson spent in conversation with Oswald.

How applicable is the profile set forth here? Although it might fit most male assassins, the paucity of data about female assailants makes one hesitant to apply it confidently to them. As for the specificity of the profile, and this is said in the absence of systematic study, although the profile may be found also in the vandal and the looter, it probably will not fit the vigilantist and the genocidist, persons who are motivated self-righteously to preserve the status quo and authoritative dominance of the elite. These individuals, who might be called omnipotent personalities, more often have had the overestimated and overexpected experience of being the first borns of their families.

Lastly, there is a need to emphasize what is not specific for assassins. For one thing, the projection of malevolence onto the target of assassination is a psychological mechanism common to almost all perpetrators of violence. To legitimize the hostile aggression, the target must be made evil or dehumanized. Moreover, the departure from reality involved in self-inflation is, of course, not peculiar to assassins. Such grandiosity is seen frequently in many kinds of psychotic individuals, ranging from the harmless to the somewhat dangerous paranoiac. Without this reality-alienating step, however, the rebellious-rivalrous personality will not go on to assassination.

So much, then, for the profile. What can be said about the American political-social climate which appears to be so congenial to assassinations? Though violence in general may be supported by the frontier tradition or by the vigilante tradition, we believe that assassination specifically draws sustenance from two American traditions that feed the rebellious-rivalrous personality. The first is one mentioned earlier: the old tradition of rebelling against despotic authority. The second is the continuing democratic ethos of equality, which can be used to legitima-

tize a rivalrous resentment of status inequality. Because this ethos is strongly operative at present, its relation to violence deserves some further discussion.

Since the 1960s young people have become increasingly skeptical that they, as juniors, can learn much from experienced seniors. This weakening of the senior-junior tutelage relationship has produced a false equality between generations, which undervalues the excellence achieved by prolonged work and experience. Further militating against excellence is the moral question occasioned by the plight of the ghetto blacks and other disadvantaged minorities, an issue which has prevented a guilt-free development of meritocracy. The democratic spirit of equality comes then to border closely on the spirit of leveling. Officers are fragged, police are called pigs, the young look askance at anyone over 30, merit cannot be easily rewarded without the risk of seeming prejudicial to some disadvantaged group, elitism is a dirty word. In view of all this, it is not surprising that the leveling mood should find expression in the assassin's taking a shortcut to equal status.

This view of the American political-social climate is similar to that expressed by conservative intellectuals in the bicentennial issue of *The Public Interest*. Thus, in "The Democratic Distemper," Huntington (1975) finds that the increased expectations and demands of minority groups and specific interest groups for equal treatment have caused an erosion in governmental authority and that, if the equalizing trend continues without modification, democracy in the United States "can easily become a threat to itself." And, according to Diamond (1975, p. 55) democracy has been transformed from a political instrument whereby political liberty can be achieved (the goal of the founding fathers) into an ideology of "equality in every respect."

Accompanying these increased expectations of "equality in every respect" is a generalized discontent when these expectations are disappointed. This angry discontent, according to one political scientist (Gurr, 1970b), serves to energize a revolution. Gurr's description of collective violence follows roughly the same sequence noted in the individual violence of the assassin: "The primary causal sequence in political violence is first the development of discontent, second the politicization of that discontent, and, finally, its actualization in violent action against political objects and actors. Discontent arising from the perception of relative deprivation is the basic instigating condi-

tion for participants in collective violence. . . . Societal conditions that increase the normal level or intensity of expectations without increasing capabilities increase the intensity of discontent" (pp. 12-13). In summary, Gurr reminds the reader that, for Aristotle, the principal cause of revolution is the aspiration for economic or political equality on the part of the common people who lack it and the aspiration of oligarchs to preserve the system that has given them power. If this is, indeed, the principal cause, it should not strike one as surprising that the roots of revolution can frequently be found in the early family rivalries over status and ascendancy between the first-son "haves" and the later-son "have-nots."

Should anything be done about this state of affairs? A good case can be made for doing absolutely nothing. The argument would run as follows: The equalizing ethos is a lesser evil than the meritorious aristocratic ethos; the inferiority feeling of the rebellious-rivalrous personalities, which leads to sporadic assassination, is less dangerous than the messianic superiority feeling of the omnipotent personalities, which leads to war making and genocide. The advocates of this position would say that it is better, in the long run, for Davids to continue to strike down Goliaths, for a Brandeis to attack bigness, and for a Nader to attack General Motors, even though occasionally an Oswald and a Sirhan will eliminate a Kennedy. This, they might say, is the price one pays for democracy. It may be possible, though, to find some middle position between the excesses of leveling and the excesses of hierarchical stratification. Perhaps some type of meritocracy can be established which would not deteriorate into a frozen caste system and which would not make excellence synonymous with elitism. For this to occur, there would have to be some restoration of senior-junior tutelage, one based on mutual respect between the generations.

But while waiting for this ideal solution to take place, we may have to depend on certain safeguards. One is to take care that the presidential succession is in good order—that, for example, the vice-president is truly of presidential caliber. The other relates to the protection of the president by the Secret Service. In order to screen potential assassins beyond that which is possible with automatic data processing, it would be highly desirable to increase the psychological sophistication of this agency. If agents cannot be given the training and time to conduct and assess depth interviews, this necessary task should be farmed out to qualified persons. Changes in this direction would be

facilitated if there were within the Secret Service an in-dwelling psychiatrist or clinical psychologist to provide organizational continuity. With these protective measures, the threat of assassination may be reduced and the attractiveness of the presidential office to competent persons much increased.

# Legal Homicide and Its Consequences

11

*Dane Archer*  
*Rosemary Gartner*



Violence by the State is strangely absent from most discussions of the problem of violence. Books about aggression, for example, often treat topics ranging from hormones to homicidal criminals without mentioning capital punishment, the shooting of looters, the beating of protesters, or even that most impressive form of “official” violence: war. This last omission is particularly astonishing, since the unrivaled mortality of wars is both well documented (Singer and Small, 1972) and reasonably contemporary—including the killing of at least 46,000 young

This project and the development of the 110-Nation Comparative Crime Data File were supported by NIMH Grant MH 27427 from the Center for Studies of Crime and Delinquency and by a Guggenheim fellowship to the first author. Responsibility for the findings and interpretations in this paper belongs, of course, to the authors alone.



American men between 1963 and 1973, in addition to the much greater death toll of other nations involved in the Vietnam War.

Why, then, is official violence nearly invisible in discussions of murder and aggression? The most obvious explanation is that wars and other forms of official violence are unique in that they wear the mantle of governmental legitimacy. When aircraft bomb a village, when the United States CIA hires assassins to kill foreign leaders, when a policeman shoots a looter, when a prison firing squad kills a convicted murderer, and when National Guardsmen use lethal weapons to break up a protest, the killings that occur are the result of orders (see Marx, 1970). These orders originate in a hierarchical organization; they are issued by appointed or elected officials and are carried out collectively by uniformed deputies who perform the actual killing. In each case the resulting homicides are described as necessary to accomplish some official objective—to stop the spread of an alien ideology, to stem the destruction of private property, to deter potential murderers of the future, or to control opponents of governmental policy. Official violence may also be justified as retaliatory—a response to “illegal” violence or the alleged threat of illegal violence. Official killings, therefore, differ from illegal violence in that they result from governmental orders, are usually performed by several agents acting collectively, and are justified as instrumental to some higher purpose. These differentiating features are the basis of the legitimation of official violence.

This process of legitimation is clearly successful in the sense that large numbers of citizens appear to regard government violence as acceptable and unproblematic. Evidence of a public mandate for official violence is easily found. In a 1968 survey, for example, 57 percent of a national sample agreed with the statement “Any man who insults a policeman has no complaint if he gets roughed up in return” (Gamson and McEvoy, 1972, p. 336). The public mandate for official violence includes even the extreme act of homicide. In another 1968 survey, by the Gallup organization, respondents were asked to react to the fact that the mayor of a large city had ordered police to shoot looters on sight during race riots; 61 percent of the men interviewed said that this was the “best way” to deal with the problem of looting. In 1969 roughly half of the American people (48 percent) also thought that shooting was the best way to handle student protests on campus (Kahn, 1972, p. 48). This tolerance of official violence may explain the

persistent public perception of riots and rioters as violent—despite the fact that the number of people killed by authorities during civil disorders has consistently exceeded the number of people killed by rioters by approximately ten to one (Couch, 1968).

Public support for official violence is so pervasive that the definition of violence is itself affected. In a 1969 survey, for example, 30 percent of a national sample said that “police beating students” was *not* an act of violence, and an astonishing 57 percent said that “police shooting looters” was *not* an act of violence (Blumenthal and others, 1972, p. 73). The semantics of the label *violence*, therefore, clearly reflect the perceived legitimacy of the actor and not merely the nature of his or her act. The same 1969 survey asked respondents what violent events were of greatest concern to them. Even though the survey occurred during the Vietnam War, only 4 percent of those interviewed mentioned war.

One consequence of the legitimation of official violence, therefore, is the creation of a reservoir of public support. For at least large numbers of Americans, it is clear that even the extreme act of homicide is not regarded as violence—if the homicide carries the stamp of government authority. Widespread deference to government violence may explain the intensity of public reaction to the concept of war crimes, including the trial of Lieutenant William Calley during the Vietnam War (Kelman and Lawrence, 1972). In view of citizen support for official killing, it is perhaps not surprising that public discussions of violence are generally limited to “criminal” violence.

The invisibility of official violence in scientific discussions of aggression, however, is somewhat more disturbing. Since social scientists are also citizens, it is possible that they too have been captured by the process of legitimation and that they—like many other citizens—no longer think of governmental homicides as violence. For example, wars are generally discussed in political terms in scholarly circles, and political opponents of a war are the only ones who label wartime killings as “murders.” Since social scientists are trained to try to regard behavior in a value-free manner, however, it is curious that there has not been more critical discussion of those acts of homicide which happen to have government auspices. Perhaps we are all, scientists included, socialized to accept the State’s monopoly on legitimate violence—and perhaps this socialization influences our curiously selective use of the label *violence*.

This tendency to see official violence as legitimate seems

limited, however, to the acts of our own government. As an extreme example, wartime practices in Nazi Germany had official government auspices and seem to have enjoyed legitimacy among most contemporary German citizens—including many scientists and intellectuals—but not among citizens of other nations. Even though socialization leads us to defer to governmental violence, therefore, a kind of moral ethnocentrism may restrict this deference to only the acts of our own government. Official acts of violence may enjoy perceived legitimacy inside a government's borders but not outside them.

There may also be structural explanations for the scientific neglect of official violence, however, and this possibility is particularly worrisome. Since social scientists operate in an institutional context, governments may be exerting a disproportionate influence on research agendas for the study of violence. The structure of scientific research itself may therefore create a lamentable "blind spot" concerning governmental violence. Unhappily, case studies of this scientific blind spot are easy to find. For example, when Governor Ronald Reagan of California announced his controversial proposal to establish a Center for the Study of Violent Behavior at UCLA, Earl Brian, the state's secretary of health and welfare, held a press briefing to describe the mission of the proposed center. When asked by a reporter whether the forms of violence studied by the violence center would include war, Dr. Brian replied, "I hadn't thought about war."

Another fascinating illustration of the way official violence can be defined to preclude scientific consideration is described in Short's (1975) excellent account of the history of the National Commission on the Causes and Prevention of Violence. Since Short served as codirector of research (with Marvin E. Wolfgang) for this important presidential commission, his narrative is as well informed as it is interesting. The national commission initially adopted a neutral definition of violence, one that concentrated on the nature of violent acts themselves: "the threat or use of force that results, or is intended to result, in the injury or forcible restraint or intimidation of persons, or the destruction or forcible seizure of property" (Short, 1975, p. 68). Early in the life of the commission, this neutral definition of violence prompted commission researchers to cast a wide net. The commission's *Progress Report*, for example, outlined the scope of the investigation: "There is no implicit value judgment in this definition. The maintenance of law and order falls within

it, for a policeman may find it necessary in the course of duty to threaten or use force, even to injure or kill an individual. Wars are included within this definition, as is some punishment of children. It also includes police brutality, the violence of the Nazis, and the physical abuse of a child" (Commission *Progress Report*, p. 3; cited in Short, 1975, p. 68). Even though official violence, such as wars and police brutality, was clearly included in the commission's initial agenda, this emphasis all but disappeared in the commission's subsequent research. For example, by the time its *Final Report* was issued, the commission was concentrating on "all illegal violence" (Short, 1975, p. 69). The insertion of the adjective *illegal* is of pivotal importance, since the actions of governments are—by definition—seldom perceived as illegal. This change of emphasis in the work of a prestigious national investigation had the effect of shifting attention to the acts of "deviant" individual criminals, members of rioting mobs, and assassins. At the same time, this rather traditional focus on illegal violence excluded the acts of governments from consideration—even though the commission conducted its investigations at the very height of the Vietnam War. In fact, Short indicates that some commission researchers had suggested creating a task force on war to go along with the seven task forces on other topics. This idea was abandoned, according to Short, because of the "potentially explosive nature of such a direct focus on war in general and on the conflict in Indochina in particular" (p. 71). Even though much of the commission's research was excellent and even of permanent value, it is still troublesome that the commission was apparently influenced to concentrate on those acts of violence of greatest concern to government—a concern which did not, of course, include the violent acts of government itself.

For all these reasons, discussions of the problem of violence—in both popular and scientific publications—have centered almost exclusively on illegal or "deviant" violence. This prejudice is clearly reflected in language. The term *murder* is almost always reserved for the acts of individual criminals, and even the more neutral word *homicide* is almost never used to describe killings committed by government officials. During wartime, for example, governments use terms like *casualties*, *body counts*, or even just *losses* to refer to actions that are really—despite these pastel euphemisms—violent homicides. When officials take lives in peacetime, words like *execution* again camouflage the fact that a killing takes place. Only the oppo-

nents of a government's violence refuse to participate in this banal vocabulary. Opponents of a war, for example, accuse government officials of "murderous" policies and refer to soldiers as "killers."

We believe that the scientific neglect of official violence needs to be remedied. It is clear that "deviant" violence has in the past monopolized the attention of researchers interested in violence. We believe that this monopoly is scientifically short-sighted, for two reasons. First of all, acts of official violence may turn out to be particularly pernicious, since they are the only forms of violence that carry the prestige and authority of the State. Second, many important and exciting questions about official violence await answers: What kinds of citizens support government violence most strongly? What kinds of government justifications of violence (such as wars or executions) are most effective in legitimating such violence? Do young children regard government violence, such as wartime killing, as "wrong"? At what developmental age are children socialized to accept government violence? Are people at various stages of "moral development" differentially supportive or critical of official violence? Do violent "criminals" support government violence more strongly than a matched group of noncriminals? How do the deputies who carry out official violence justify their behavior to themselves? What kinds of arguments are most effective with juries in death penalty cases? Are Americans more supportive or tolerant of official violence than citizens of relatively nonviolent societies like England? This research agenda is clearly both rich and relatively unexplored.

### Consequences of Violence by the State

For the past several years, we have been interested in the consequences of violence by the State. Specifically, we wondered whether the most impressive form of official violence, war, tends to increase the level of violence in a society after the war is over. There are rather compelling theoretical reasons to suspect that wars might produce a legacy of postwar violence. For example, there is now incontrovertible evidence that social learning or "modeling" mediates many forms of aggression and violence (Bandura, 1973). Although most research in this area has used either experiments or causal regression techniques to assess the effects of watching media violence, "modeling" theory also appears to provide the best explanation of the appar-

ently contagious patterning of specific murder methods, airplane hijackings, and terrorism (Bandura, 1973, pp. 101-107). The basic tenet of social learning theory is that acts of media violence and real violence can provide a model or script which increases the likelihood of imitative violence. In addition, research indicates that aggressive models appear to be most influential when they are seen as rewarded for their aggression.

If the violent acts of real or fictional individuals can compel imitation, it seems to us very possible that official violence like war could also provide a script for the postwar acts of individuals. Wars, after all, carry the full authority and prestige of the State, and wars also reward killing in the sense that war "heroes" are decorated and lionized in direct proportion to the number of their wartime homicides. Wars also carry, of course, objectives and rationalizations unique to each war—securing the Crimea, humbling the Boers, stopping fascism, deterring communism, and so on. But what all wars have in common—when they are stripped of their idiosyncratic circumstances—is the unmistakable moral lesson that homicide is an acceptable, or even praiseworthy, means to certain ends. It seems likely that this moral lesson will not be lost on at least some of the citizens in a warring nation. Wars, therefore, contain in particularly potent form all the ingredients necessary to produce imitative or modeled violence: great numbers of violent homicides, official auspices and legitimation, and conspicuous praise and rewards for killing and killers.

Even though there are theoretical reasons to expect wars to provide an imitated model for postwar killing, a rigorous test of this legitimation hypothesis is fraught with complications. At first glance, there are a number of intriguing observations in support of the hypothesis. For example, during the Vietnam War the United States murder and nonnegligent manslaughter rate more than doubled—from 4.5 (per 100,000 persons) in 1963 to 9.3 in 1973 (Archer and Gartner, 1976b). This single case of an astonishing increase cannot be regarded as persuasive evidence of a violent legacy of war, of course, because there were many other social and demographic changes in the United States during this decade. A definitive test of the legitimation hypothesis requires a large number of cases, so that the changes in homicide rates in many warring societies can be assessed. In addition, it is important to disentangle the two very different questions included in the legitimation hypothesis: (1) the empirical question of whether, in general, homicide rates do in-

crease after wars and (2) the more interpretive question of what wartime variables could actually cause such increases.

Although writers and social scientists have long suspected that war leaves a violent legacy, a general test of this suspicion has not been possible in the past. The central obstacle to such a test has been the unavailability of the necessary records on national rates of homicide over time. Without a large archive of annual homicide rates for many nations, it has not been possible to test the legitimization hypothesis. Over a period of three years, we have collected a Comparative Crime Data File (CCDF) containing annual rates of homicide and other offenses for 110 nations and 44 major international cities for the period 1900-1970 (see Archer and Gartner, 1976b; see also Archer, Gartner, Akert, and Lockwood, in press; Archer and Gartner, in press).

The creation of the CCDF makes it possible for the first time to attempt a general answer to the question of whether violence by the State increases subsequent violence by individuals. Our basic research design involves a comparison of homicide rate changes in combatant societies with the changes in a control group of noncombatant nations. This controlled comparison is designed to guard against the possibility that homicide increases might be universal over a given period. Only if wars produce consistent increases in postwar homicide rates, therefore, will the changes in combatant nations differ from those in noncombatant nations during the same years. Since wartime mobilization renders the data uninterpretable for war years themselves, we chose as the two periods of comparison the five years prior to a war and the five years after (Archer and Gartner, 1976b). Records of national participation in wars were obtained from an encyclopedic inventory published by Singer and Small (1972). The rich historical data in the CCDF made it possible to examine homicide rate changes after fourteen wars and, since several nations were involved in some wars, after a total of fifty "nation-wars" (one nation in one war). These changes, and the changes in thirty control cases uninvolved in these wars, are shown in Table 1.

Our analysis demonstrates that warring nations were more likely to experience homicide rate increases than nations not involved in war. A majority of the combatant nations experienced homicide rate increases of at least 10 percent, while a majority of the uninvolved nations experienced homicide rate *decreases* of greater than 10 percent. Many of the homicide rate increases in warring nations were very large; in several cases the

Table 1. Homicide Rate Changes in Combatant and Control Nations After World War I,  
World War II, the Vietnam War, and Eleven Other Wars

|                   | Homicide Rate Change (%) |     |                        |                          | Increase               | %   |
|-------------------|--------------------------|-----|------------------------|--------------------------|------------------------|-----|
|                   | Decrease                 | %   | Unchanged (<10%)       | %                        |                        |     |
| Combatant Nations | Australia (I)            | -23 | England (I)            | -5                       | Belgium (I)            | 24  |
|                   | Canada (I)               | -25 | France (I)             | 4                        | Bulgaria (I)           | 22  |
|                   | Hungary (I)              | -57 | S. Africa (I)          | -1                       | Germany (I)            | 98  |
|                   | Finland (II)             | -15 | Canada (II)            | 6                        | Italy (I)              | 52  |
|                   | N. Ireland (II)          | -83 | Australia (VN)         | 7                        | Japan (I)              | 12  |
|                   | U.S. (II)                | -12 | Korea (VN)             | 6                        | Portugal (I)           | 47  |
|                   | India (1962 Sino-Ind)    | -14 | Philippines (VN)       | 9                        | Scotland (I)           | 50  |
|                   | Israel (1956 Sinai)      | -58 | Egypt (1956 Sinai)     | -2                       | U.S. (I)               | 13  |
|                   | Italy (1896 It-Eth)      | -15 | Egypt (1967 6-Day)     | -4                       | Australia (II)         | 32  |
|                   | Italy (1935 It-Eth)      | -44 | France (1884 Sino-Fr)  | 0                        | Denmark (II)           | 169 |
|                   |                          |     | India (1965 2nd Kash)  | 6                        | England (II)           | 13  |
|                   |                          |     | Japan (1904 Russo-Jap) | -9                       | France (II)            | 51  |
|                   |                          |     | Japan (1932 Manch)     | -8                       | Italy (II)             | 133 |
|                   |                          |     |                        |                          | Japan (II)             | 20  |
|                   |                          |     |                        |                          | Netherlands (II)       | 13  |
|                   |                          |     |                        |                          | New Zealand (II)       | 313 |
|                   |                          |     |                        |                          | Norway (II)            | 65  |
|                   |                          |     |                        |                          | Scotland (II)          | 11  |
|                   |                          |     |                        |                          | S. Africa (II)         | 104 |
|                   |                          |     |                        |                          | New Zealand (VN)       | 50  |
|                   |                          |     |                        |                          | Thailand (VN)          | 14  |
|                   |                          |     |                        |                          | U.S. (VN)              | 42  |
|                   |                          |     |                        |                          | Hungary (1956 Russo-H) | 13  |
|                   |                          |     |                        |                          | Israel (1967 6-Day)    | 14  |
|                   |                          |     |                        |                          | Japan (1894 Sino-Jap)  | 15  |
|                   |                          |     |                        |                          | Jordan (1967 6-Day)    | 35  |
|                   |                          |     |                        | Pakistan (1965 2nd Kash) | 13                     |     |

(continued on next page)



Table 1 (Continued)

|                 | Homicide Rate Change (%)  |     |                        |    |                        |
|-----------------|---------------------------|-----|------------------------|----|------------------------|
|                 | Decrease                  | %   | Unchanged (<10%)       | %  | Increase               |
| Control Nations | Norway (I)                | -37 | Ceylon (I)             | 8  | Finland (I)            |
|                 | Ceylon (II)               | -19 | Chile (I)              | -3 | Thailand (I)           |
|                 | Chile (II)                | -67 | Netherlands (I)        | -2 | Colombia (II)          |
|                 | El Salvador (II)          | -20 | Thailand (1932 Manch)  | 7  | Sweden (II)            |
|                 | Ireland (II)              | -22 | Ceylon (1962 Sino-Ind) | -4 | Turkey (II)            |
|                 | Switzerland (II)          | -42 |                        |    | Canada (VN)            |
|                 | Thailand (II)             | -17 |                        |    | England (VN)           |
|                 | Burma (VN)                | -17 |                        |    | Taiwan (VN)            |
|                 | Indonesia (VN)            | -23 |                        |    | Ceylon (1965 2nd Kash) |
|                 | Japan (VN)                | -23 |                        |    |                        |
|                 | Austria (1956 Russo-H)    | -13 |                        |    |                        |
|                 | Burma (1965 2nd Kash)     | -13 |                        |    |                        |
|                 | France (1896 Italo-Eth)   | -13 |                        |    |                        |
|                 | Switzerland (1935 It-Eth) | -22 |                        |    |                        |
|                 | Turkey (1956 Sinai)       | -33 |                        |    |                        |
|                 | Turkey (1967 6-Day)       | -19 |                        |    |                        |
|                 |                           |     |                        |    |                        |
|                 |                           |     |                        |    |                        |
|                 |                           |     |                        |    |                        |
|                 |                           |     |                        |    |                        |
|                 |                           |     |                        |    |                        |
|                 |                           |     |                        |    |                        |

<sup>a</sup>Finland and Thailand are both included as control cases for World War I, because these two nations were not identified as combatants by Singer and Small (1972), the wisdom of classifying these nations as noncombatants during this period is far from clear. Finland underwent something of an "internal" or civil war in 1918, and Thailand actually sent troops to the Allied cause during World War I.

Source: Archer and Gartner (1976b).

nation's prewar homicide rate more than doubled. The legitimization hypothesis is, therefore, consistent with the results in Table 1. Wars do produce a postwar legacy of increased homicide rates.

Even though the difference between combatant and non-combatant nations is striking, this comparison is actually a very conservative test of the legitimization hypothesis. Along with many other changes, wars produce dramatic changes in the age and sex structure of a nation's population. The numbers of young men killed in twentieth-century wars have often been staggering. At the end of World War I, for example, out of every thousand men who were between 20 and 45 at the war's outbreak, 182 had died in France, 166 in Austria, 155 in Germany, 101 in Italy, and 88 in Britain (von Hentig, 1947, p. 349). Since young men are universally overrepresented in homicide offense rates (Wolfgang and Ferracuti, 1967), these wartime losses remove from a nation's population precisely those who are statistically most likely to commit homicide in the postwar years. In addition, the postwar baby booms, particularly after large wars, also tend to reduce postwar homicide rates by inflating the population denominator on which they are calculated.

The implications of these conservative artifacts can be summarized easily: If one corrects for the wartime depletion of young men and the surge of postwar babies, warring nations experienced homicide increases even greater than those shown in Table 1. For example, France is shown as having a negligible homicide rate increase of 4 percent after World War I and is classified as an unchanged case in Table 1. If one controls for France's appalling wartime losses, however, the observed postwar homicide rate can only be considered as an impressive increase. The fact that combatant nations still showed increases much more frequently than the noncombatant nations in Table 1, despite the conservative effect of these demographic changes, is therefore particularly impressive.

The nation-wars in Table 1 varied considerably in length of wartime involvement and number of men killed. The warring nations in our study, therefore, received different "doses" of war. In terms of the legitimization hypothesis, nations with the greatest wartime mortality are exposed to a larger scale of legitimate killing than other nations. Using the information provided by Singer and Small (1972), we were able to classify nation-wars according to the amount of war experienced by each. The classification we used was whether a nation had fewer or more

than five hundred battle deaths per million prewar population. This control procedure produces even more dramatic results and again runs counter to what one would expect from population changes alone. The nations that were heavily impacted by wartime killing suffered postwar homicide increases with particular consistency; 79 percent of these nations experienced homicide rate increases, and only 21 percent had decreases. We interpret this result as an internal validation of the overall finding in Table 1, since the nations most likely to show homicide increases are precisely those nations that experienced the largest "amounts" of war.

The answer to the first of the two questions prompted by the legitimization hypothesis is therefore unambiguous. Warring nations are more likely than nonwarring nations to experience postwar surges in individual acts of homicide. The increases occur despite massive wartime losses of young men and are particularly common among nations whose wartime involvement is unusually deadly. It is still a separate matter, of course, to test the second half of the legitimization hypothesis: What is it about wars that actually produces these increases in postwar violence? For example, there has been a long history of speculation about whether veterans of wars are more likely than other citizens to commit acts of violence (Archer and Gartner, 1976a). This fear appears to surface after each war. For example, attorney Clarence Darrow (1922, p. 218) attributed post-World War I crime increases to the returned veterans, whom he described as "inoculated with the universal madness," and Lifton (1973, p. 32) made this more recent prediction about Vietnam veterans: "Some are likely to seek continuing outlets to a pattern of violence to which they have become habituated, whether by indulging in antisocial or criminal behavior or by offering their services to the highest bidder." The basic idea behind this speculation is that the military socializes men to be both more accepting of and more proficient at killing and that this experience may increase the likelihood that veterans will use violence even after the war is over.

A number of spectacular case studies appear to lend substance to the image of the violent veteran. For example, some soldiers who rode with Quantrill's guerrillas during the American Civil War became well known for their postwar lawlessness; they were Jesse and Frank James and the Younger brothers. There are also many recent examples. In 1949 a combat veteran named Howard Unruh went on a rampage in Camden, New Jer-

sey, and killed twelve people with a souvenir pistol—Unruh had won marksman and sharpshooter ratings during World War II. During the Vietnam War, a soldier named Dwight Johnson killed about twenty enemy soldiers and was awarded the Congressional Medal of Honor; several months after his return home to Detroit, he was shot and killed while trying to rob a grocery store. Case studies prove very little by themselves, of course, and the more general question is whether the acts of violent veterans can explain the homicide increases we have observed in postwar societies. Since most nations, including the United States, do not maintain records on the military experience of persons arrested for homicide, it is difficult to determine whether veterans are overrepresented in homicide statistics. Even if the number of homicides committed by veterans were known, it is not clear what rate we would compare this with, since veterans and nonveterans differ in many ways in addition to military experience. An indirect approach to this question involves comparisons between two types of veterans, combat and noncombat; and recent research has not found unusually high rates of offenses or violence among combat veterans (Borus, 1975). In the absence of firm evidence, the image of the violent veteran may be more myth than reality. The persistence of the myth is probably due, in part, to the nature of the training that soldiers receive. Civilians may have deep-seated misgivings about teaching soldiers to kill, and they may fear that it is easier to unleash violence than to rein it in again.

We have found evidence that the hypothesis of the violent veteran, despite its popularity, cannot explain the postwar homicide increases observed in warring nations. The key answer to this question is our finding that postwar increases in violence have occurred among groups who could not have been combat veterans. During the Vietnam War, for example, violence increased precipitously for United States men and women; between 1963 and 1973 homicide arrests increased 101 percent for men and 59 percent for women. We have also obtained data from other nations on postwar offense rates for men and women, and it is clear that postwar rates of violence increase for both sexes. As a final bit of evidence, postwar homicide rates also increase among all age groups, and not just among the young veteran age cohort.

In summary, postwar increases in homicide rates are both common and pervasive. They occur after large and small wars, in victorious as well as defeated nations, in nations with im-

proved postwar economies and nations with worsened economies, among veterans and nonveterans, among men and women, and among offenders in several age groups. We believe that these homicide rate increases cannot be explained by artifacts or by other social changes which happen to coincide with wars. Instead, we think that this finding reveals a potential linkage between the violence of governments and the violence of individuals. This linkage is mediated, we believe, by a process of legitimation in which wartime homicide becomes a high-status, rewarded model for subsequent homicides by individuals. Wars provide concrete evidence that homicide, under some conditions, is acceptable in the eyes of a nation's leaders. This wartime reversal of the customary peacetime prohibition against killing may somehow influence the threshold for using homicidal force as a means of settling conflict in everyday life. There is even some independent evidence of the mechanisms by which governmental violence can permeate the private lives of citizens in warring societies; for example, Huggins and Straus (1975) have shown that fictional violence in children's literature reaches a dramatic maximum in war years.

Even though social scientists have in the past amassed impressive experimental evidence that violence can be produced through imitation or modeling, they have in general neglected the possibility that government—with its vast authority and resources—might turn out to be the most potent model of all. This powerful influence of governments on private behavior seems to be what Justice Louis Brandeis had in mind when he wrote in 1928: "Our government is the potent, the omnipresent teacher. For good or ill, it teaches the whole people by its example. Crime is contagious. If the government becomes a lawbreaker, it breeds contempt for the law."

The astonishing neglect of official violence in the social sciences has almost certainly resulted from the curious tendency of both citizens and scientists to avoid labeling the acts of governments—including even the extreme act of homicide—as violence. This deference to the legitimacy of governments has resulted in the near omission of wars and other forms of official homicide from discussions of violence. The new finding that wars cause surges in postwar homicide rates suggests that this omission is lamentable and that the violent acts of individuals may in part be catalyzed by the violent times in which governments cause them to live.

# *Part III*



The problem of aggression and how to deal with it has vexed mankind for centuries. In a letter to Sigmund Freud on July 30, 1932, Albert Einstein posed the most insistent of all the problems civilization has to face: "Is there any way of delivering mankind from the menace of war?" Freud's reply was characteristically shocking: "Conflicts of interest between men are settled by the use of violence." We are still hard pressed, about forty-five years later, to answer adequately the question posed by Einstein. However, the phenomenon of aggressive behavior has been the focus of scientific study, and it is the mission of this section to present several different perspectives on aggressive behavior.

The section opens with a chapter by Marvin Wolfgang on violence in the family. He presents a cogent sociological analysis of this problem. Statistical trends, and a combination of current

# *Aggression*



theorizing with original insights, lead Dr. Wolfgang to conclude that violence in the family is due in great part to a violent culture and subcultural values. The author discusses the implications of this hypothesis.

A sociological analysis of violence in the public schools is provided by Robert L. David and Jürg K. Siegenthaler, who discuss this phenomenon from the perspective of the general student subculture as it responds to authority and institutional power. The authors argue that the solution to student violence lies with society and the parents rather than with the educational institution.

In the chapter on the aggressive female, Emilie Sobel discusses the phenomenon of female aggression in the context of the present scene and goes on to review biological, ethological, developmental, behavioral, psychological, and psychoanalytic

viewpoints on the topic. She presents a critical analysis of all major theories. From this current point of view, previous research findings with reference to sex differences between males and females take on new significance. Sobel suggests that more conclusive research is necessary to determine whether the quality of aggression manifests itself differently in women.

In Chapter Fifteen Brandt Steele explores the problem of child abuse from the perspective of the psychology of the child abuser within the family makeup. Ironically, the child abuser is not an aggressive or a violent individual but rather suffers from a deep sense of inadequacy, worthlessness, and insecurity. He is not necessarily a sociopath or a psychotic, but there is a striking constellation of psychological factors that predispose certain individuals to discharge aggression toward their own children. Most notably, the child abuser is an individual who was himself abused, neglected, and disparaged by his own parents. Steele also evaluates the interaction between individual psychology and those sociocultural factors that act as a catalyst for violence of this type.

It is generally accepted that most sexual offenders are not violent but rather passive and inadequate individuals who flee rather than fight when confronted. However, some sexual offenders are aggressive. It is to this comparatively small but very significant group of offenders that Fritz Henn turns his attention in his analysis of the aggressive sexual offender. He divides sex crimes into those primarily sexual with secondary aggression and those primarily aggressive with secondary sexual components. The topic is covered from both a sociological and an individual psychopathological perspective. Issues involving treatment and prevention are also touched upon.

The next chapter presents a thorough discussion of the ubiquitous problem of alcohol and drugs and their relationship to aggression. Robert J. Powers and I. L. Kutash divide the problem of substance addiction into five basic issues and discuss the complexities of trying to tease out cause-and-effect relationships among them. Each chemical substance is discussed separately, and its direct and indirect effects on behavior are noted. The authors also discuss treatment methods, with clinical examples, and the problems of future research.

In the final chapter of this section, John Sabini examines the pertinent experimental and laboratory research studies of aggression. Specifically, he discusses experimental studies on the frustration-aggression hypothesis, arousal and aggression, instru-



mental aggression, and conformity to authority; and he compares the results with basic psychoanalytic tenets. Sabini takes a behavioristic position and concludes that aggression can be understood best in terms of the principles of learning rather than in terms of intrapsychic or psychodynamic depth explanations.

# Violence in the Family

*Marvin Wolfgang*



There is no society that does not contain in its normative system some elements of acceptable limits to violence in some form (see Wolfgang, 1970a). Thus, the use of physical force by parents to restrain and punish children is permissible, tolerated, and encouraged and is thereby part of the normative process by which every society regulates its childrearing. There are, of course, varying degrees of parental force expected and used in different cultures and times, and there are upper limits vaguely defined as excessive and brutal. The battered-child syndrome is an increasingly recorded phenomenon in American society. The point is, however, that our norms permit parents to apply force for their own ends against the child. The application of force is

A version of this paper was presented at the 1976 Symposium on Violence in Families, Philadelphia, March 21, 1976.

a form of violence and may be used consciously to discipline the child to the limits of permitted behavior, to reduce the domestic noise level, to express parental disapproval, and even unconsciously as a displacement for aggression actually meant for other targets. This model of parent-child interaction is a universal feature of all human societies. The model is one that the child himself comes to ingest: that the individual who possesses superior force is able to manipulate and dominate others and thereby obtain his own desires and ends.

The violence in which the child engages is but an expressed extension of this basic model. The use of physical restraint and force is not a feature only in lower-class families, although studies have shown that its persistent use, and use in greater frequency over a longer span of childhood, is more common in that social class. The substitutions, by middle-class parents, of withdrawal of rights and affection, of deprivation of liberty, and of other techniques are designed to replace the need for force. And by these substitutions an effort is made to socialize the child to respect other forms of social control. They are also ways of masking the supreme means of control—namely, physical force.

Violence and the threat of violence form the ultimate weapons of any society for maintaining itself against external and internal attacks. All societies finally resort to violence to solve problems that arise from such attacks. War is aggressive force between nations and is legitimized within each. The recognition of relativity in the moral judgments about violence is quite clear in the case of war. When our colonies collected themselves together in the eighteenth century to sever ties, we called the action revolution and good, in historical retrospect, despite the violence it engendered. When some states in the nineteenth century sought to divide the nation, we called the action civil war and bad, and we lamented the bloodshed. The Nazis gave justice to our bombs and enlisted the world's generation of youth to react violently to violence. In other international conflicts, however, the label of legitimacy has been seriously questioned by substantial numbers within the nations involved. And when this happens, a society becomes more conscious of the process of socializing its own youth to accept violence as a mode of response, as a collective problem-solving mechanism. When war is glorified in a nation's history and included as part of the child's educational materials, *a moral judgment about the legitimacy of violence is firmly made.*

Socialization means changing the individual into a personality; it is the process of cultural transmission, of relaying through the social funnel of family and friends a set of beliefs, attitudes, values, habits, and verbal expressions. When the front-line instruments of war become part of the physical features of a child's life space, when cannons, rifles, grenades, and soldiers are moved from real battlefields to the mind of the child and the plastic world of his playroom and are among the relatively few objects touched and manipulated by the child in the process of becoming, then some set of values associated with the legitimacy and recognition of the superiority of violent activity is transmitted. What is not empirically clear is the extent to which such transmission is later translated into violence by the child—as a child, youth, or adult. As a legislator, father, policeman, or any other role actor, he is still the carrier of attitudes related to that play activity, unless contrary values have intervened.

The presence of various groups, ranging from the culturally prescribed to the barely tolerated (the police and the national guard, the less visible and more silent cadres of guards in prisons, mental institutions, banks, parks, and museums; and unofficial groups like the lynching mobs of yesteryear, the Minutemen and vigilantes of the rural South and the urban North, and certain black militants who have armed their members for assault), has diffusive effects that are part of the socializing experience of youth into the acceptance of violence as a means of control. The more these agents of real or potential aggression are used, the more impact such use has in socializing others, particularly children and youth, to the functional utility of violence. If the adults in a society regard official violence as a value, many of the young generation exposed to such values will have heightened acceptance of its use. Furthermore, many who are, ethnically or otherwise, aligned with the targets of officially legitimized violence will, with its more common and intensified use, respond in like manner—thereby confirming the need to use violence to combat violence. And this message is passed on to yet another group of the younger generation, who learn to attack the guardian executors of the larger society with their own contrived version of legitimate violence.

Another cultural dimension relevant to violence is the theme of masculinity and the effect that this image of the strong masculine role has had on childrearing and the general socialization process. The middle-class child today has some dif-

ficulty if he seeks to match himself to the old masculine model, and he may become neurotic and insecure. Among the lower classes, says Miller (1958), the continuity of the physically assertive male is still one of the "focal concerns." The desire to prove one's masculinity, added to the desire to become a successful male adult member of the lower-class culture, requires adolescent "rehearsal" of the toughness, heavy drinking, and quick aggressive response to certain stimuli that are characteristic of the lower-class adult male. This strong masculine emphasis may be on its way out in our culture (see Wolfgang and Ferracuti, 1967). What remains, however, is undeniable, and evidence of it is still available as part of the socializing experience of many males who engage in violence.

The role that females have had in consciously promoting the strong male image has often been overlooked. In the past, in their own search for identity as females, they have driven the male to highlight differences by encouraging the myth of medieval chivalry; they have sought his strong arms of security, buttressed his aggressivity against other suitors, and passed on this male model to their progeny. A culture in which mothers direct their small boys to "act like little men" and refrain from crying when hurt may be preparing them in the customary fashion for strength against adversity and for stalwart stoicism in the face of more severe pain ahead. But it may also promote a greater desensitization to noxious assaults performed on or by them. Moreover, males, rather than females, are commonly employed to investigate homicides and suicides, to prepare the dead for burial, and to handle the injuries of highways; in short, men are required to assume responsibility for the physical public injuries and tragedies of humanity. Women are often protected from such displays. It is also the male who is expected to use violence in prescribed ways and at prescribed times, during which he must be sufficiently desensitized to the pain he inflicts, whether in the steet or on a battlefield. It should not be unexpected, therefore, that most delinquent acts of physical injury are also committed by males.

Many other culture items contribute to a general aura of violence. Violence in the mass media, automobile advertising that promotes aggressive driving ("Drive it like you hate it—it's cheaper than psychiatry"), and the existence of 100 million guns in our population with a higher gun-to-population ratio than anywhere in the world must make a difference. Research gives evidence to these claims.

### Extent and Character of Family Criminal Violence

Child abuse and incest are important factors but will be left for others to describe. I shall concentrate on crimes of violence ordinarily found in official police statistics. Despite limitations, the *Uniform Crime Reports* offer baseline data. These are police reports from all over the country submitted to the FBI and annually reported by the Department of Justice. The only family information offered concerns criminal homicide, which has had an amazing stability of frequency distributions since 1930, when police statistics were first collected on a national basis. Of the 15,910 homicides in 1970, for example, 12.1 percent were spouse killing spouse; and of the 20,600 homicides in 1974, 12.1 percent again were in the same category. In this latter year, in addition, 2.7 percent involved a parent killing a child; 8 percent, "other relative killings"; and 6.2 percent, "romantic triangle and lovers' quarrels." Murder within the family made up approximately one fourth of all the murder offenses, and half of the family killings involved spouse killing spouse. In these murders, the wife was the victim in 52 percent of the incidents and the husband in the remaining 48 percent. Fifty percent of the victims were black, 48 percent white, and the remaining were of other races (U.S. Department of Justice, 1974, p. 19).

In an earlier study of family criminal violence (Wolfgang, 1958), 588 homicides in Philadelphia were examined. Of the 136 victims who had a familial relationship to their slayers, there were 100 husbands or wives, 9 sons, 8 daughters, 3 mothers, 3 brothers, 2 fathers, 1 sister, and 10 other types of associations. Of the 100 marital relationships, 53 wives were slain by their husbands and 47 husbands by their wives. Significantly, the number of wives homicidally assaulted by their husbands constituted 41 percent of all women who were killed, whereas husbands homicidally assaulted by their wives made up only 11 percent of all men who were killed. When a man was killed by a woman, he was most likely to be killed by his wife. Of 75 black males slain by black females, 40 (53 percent) were husbands slain by their mates; and of 9 white males killed by white females, 7 were slain by their mates. When a woman committed homicide, she was more likely than a man to kill her mate. Of 89 black female offenders (for whom a victim-offender relationship had been identified), 40 (45 percent) had killed their husbands; and of 15 white female offenders, 7 had killed their husbands. On the other hand, of 321 black male offenders, only

40 (12 percent) had killed their wives; and of 118 white male offenders, only 13 (11 percent) had killed their wives. All told, when the 105 identified female offenders committed homicide, they killed their husbands in 45 percent of the cases; but when the 445 identified male offenders committed homicide, they killed their wives in only 12 percent of the cases.

Severe degrees of violence—those in which more than five acts are involved—were most likely to have a home for the scene; and a larger proportion of “more than five acts” occurred among mate killings. For all victims (588), “more than five acts” ranked fourth among the violent homicide categories, preceded by “three to five acts,” “severe beatings,” and “two acts” respectively. Of all violent homicides, 18 percent involved more than five acts of stabbing or shooting. However, among husband-wife homicides, the category of “more than five acts” ranked second and constituted 24 percent of all the violent mate slayings. Thus, husband-wife homicides are violent to a greater degree than violent homicides in general. To this extent, violence and intimacy of personal relationship are associated.

The distribution of husband-wife homicides according to police-recorded motives shows an expectedly high proportion due to domestic quarrels; 64 percent of the slayings were the result of such quarrels. Twenty-three percent were due to jealousy, compared to only 11 percent of all homicides.

The single place where most husband-wife killings occurred was in the bedroom. Sex differentials are important to this generalization, however. Whereas 24 (45 percent) of the 53 wives were killed in the bedroom, only 11 (23 percent) of the 47 husbands were killed there. Thus, proportionately, the bedroom is a more lethal place for wives than for husbands. For the kitchen the reverse appears to be true, for only 10 wives were slain there, compared to 19 husbands. Finally, with respect to place of occurrence, 85 percent of husband-wife slayings occurred in the home and only 15 percent outside the home, a relative proportion that is true for both husbands and wives.

Wives usually stabbed their mates; 30 wives used this method to kill their husbands, and only 15 shot them. Husbands were less discriminating; they killed their wives in almost equal proportions of the leading methods. In 19 cases they shot their mates, in 16 they stabbed them, and in 15 they beat them to death. Of the 45 wives killed in the home, 17 were shot and 15 were beaten; of the 40 husbands killed in the home, 23 were stabbed.

When a husband was killed in the kitchen, his wife

usually used a kitchen instrument that was easily accessible (a butcher knife or paring knife was most common). This fact indicates that most kitchen slayings were committed in the heat of passion, during a quarrel and on the spur of the moment. Of the husbands killed in the kitchen, 17 were stabbed with a kitchen knife, and only 2 were shot. Of 11 husbands killed in a bedroom, 4 were stabbed with a kitchen knife, 4 were shot with a pistol, 1 was shot with a shotgun, 1 was cut with a jagged drinking glass, and 1 was soaked with kerosene and burned to death. Of 24 wives killed in a bedroom, 9 were beaten or strangled, 6 were stabbed with a kitchen knife, 4 were shot, and 1 each was slain by a mop handle, an electric iron, an iron pipe, an overdose of barbiturates, and a push from a third-floor apartment. All told, among the wives killed in a bedroom there were 12 beatings, 6 stabbings, 4 shootings, and 2 by miscellaneous methods. When a husband was killed in any place in the home other than the kitchen or bedroom, his wife used a pistol in 4 cases, a shotgun in one, a penknife in 3, a kitchen knife in 2. When a wife was slain any place in the home other than the kitchen or bedroom, her husband used a pistol in 9 cases, a shotgun in 1, and a penknife in 1.

Brief mention might be made of the adjudication of husband-wife slayings (see Table 1 and Table 2). These court dispositions reveal that (1) a higher proportion of husbands (64 percent) than wives (55 percent) were found guilty; (2) a higher proportion of wives (34 percent) than husbands (4 percent) were acquitted; (3) more husbands (19 percent) than wives (2 percent) committed suicide after having killed their mates; (4) husbands were convicted of more serious degrees of homicide than were wives. The majority of husbands were convicted of

Table 1. Disposition of Homicide Cases According to Marital Status of Defendant

|                   | <i>Husband</i> | <i>Wife</i> |
|-------------------|----------------|-------------|
| Guilty            | 34             | 26          |
| Not guilty        | 2              | 16          |
| Nolle prosequi    | 2              | 2           |
| Pending           | 3              | 2           |
| Suicide           | 13             | 1           |
| Died before trial | 1              | —           |
| Fugitive          | 1              | —           |
| Total             | 53             | 47          |



Table 2. Court Designation of Homicide According to Marital Status of Defendant

|                          | <i>Husband</i> | <i>Wife</i> |
|--------------------------|----------------|-------------|
| First-degree murder      | 10             | —           |
| Second-degree murder     | 10             | 4           |
| Voluntary manslaughter   | 10             | 15          |
| Involuntary manslaughter | 4              | 7           |
| Total                    | 34             | 26          |

murder while five sixths of wives were convicted of manslaughter. None of the wives, but about a third of the husbands, were convicted of first-degree murder. Less than one sixth of the wives, contrasted to three fifths of the husbands, were convicted of either of the degrees of murder. An immediate and common conclusion from these data is that the courts treat wives with greater leniency than they do husbands. Such an interpretation of differential treatment assumes that all other things are equal—that there is no major difference in the actual types of homicides committed by wives and husbands. Close examination of these mate slayings reveals, however, that it is not necessarily true that the courts treated wives with unjustifiably greater leniency than they did husbands; for in twenty-eight cases involving female defendants, the husband had strongly provoked his wife to attack, and, although she was not exonerated on grounds of self-defense, there had been sufficient provocation by the husband (as the victim) to reduce the seriousness of her offense. In contrast, provocation recognized by the courts occurred in only five cases in which husbands killed their wives.

More recent data were collected by the National Commission on the Causes and Prevention of Violence in 1968-69 in a representative sampling of seventeen major cities in the United States. In these cities combined, 15.8 percent involved husband-wife slayings; 2 percent, children killing a parent; 3.9 percent, parent killing a child; 1.4 percent, brother-sister slayings; and 1.6 percent, "other family" homicides (see Mulvihill, Tumin, and Curtis, 1969). In addition, 14 percent of all aggravated assaults (that is, physical injury of a grievous character, with a gun, knife, or similar weapon, causing serious injury) were between family members, half of which were again husband-wife assaults. Sex-race relationships similar to homicide occur in aggravated assaults. When the victim is a female, the relationship

is more likely to be between husband and wife than when a male is the victim of aggravated assault. When a mate is assaulted, the husband is the offender in about three fourths of the cases. The difference between an aggravated assault and a homicide may be little more than speedy communication to the police in an assault offense, rapid transportation to a hospital, and the degree and speed of medical technology applied to a serious injury. Finally, the National Commission survey noted the weapons used in spouse slayings and assaults. Guns were used in half of the cases of homicide; but knives, blunt instruments, and beatings were more common in assaults that did not end in death. The weapon, rather than the intention or motive, makes more of a difference between serious injury and death.

The rates and proportions of family assaults and slayings in cross-cultural studies—studies of primitive African societies, comparisons between Jews and non-Jews in Israel, and comparative studies of the Soviet Union, Canada, England, Denmark, and Japan—reveal similar or slightly higher intrafamilial violence (Curtis, 1974). In Japan infanticide rates are higher; and wherever the family is a dominant social institution, the proportion of homicides is higher within the primary group of the family. Even so, the incidence of homicide in the family is highest in the lower socioeconomic class. And it is in this lower-class structure that the use of physical assaultive behavior is a more common reaction to social interaction.

Within our broader cultural context, there is a "subculture of violence" (Wolfgang and Ferracuti, 1967), which is culturally transmitted from generation to generation. In this subculture, generated primarily in a lower socioeconomic class disadvantaged in all the traditionally known ways, the use of violence is either tolerated and permitted or specifically encouraged from infancy through adulthood. From childrearing practices that commonly use physical punishment and that contain many elements of child abuse, to childhood and adolescent play and street gang and group behavior, to domestic quarrels and barroom brawls, physically assaultive conduct is condoned and even part of expected response to many interpersonal relationships. Machismo, but more than this, is involved in the value system that promotes the ready resort to violence upon the appearance of relatively weak provoking stimuli. The repertoire of response to frustration or to certain kinds of stimuli (including name calling and challenges to the ego) is limited often to a physically aggressive one, and the capacity to withdraw or to

articulate a verbal response is minimal. These characteristics are shared by cohorts of youth who will fight instead of flee, assault instead of articulate, and kill rather than control their aggression.

This proposition of a subculture of violence suggests that violence is learned behavior and that it is normal, not individual pathological, behavior. Moreover, the greater the degree of commitment to the subcultural values, the fewer the number of alternative responses the individual has to cope with social encounters. Homicide, rape, and aggravated assault have historically been predominantly intragroup crimes: within the family or among friends, acquaintances, neighbors, and the intimate social network. More physical mobility and intergroup interactions have increased the number of victims outside the subculture, the number of victims who are strangers to the offenders, and have consequently promoted wide public fear of random assaults and victimization (see Wolfgang and Ferracuti, 1967).

Other evidence about the social dynamics of family structure buttresses this proposition of a subculture of violence, where physically assaultive behavior is not uncommon. So prevalent is family violence and the literature on this topic that in 1974 the National Institute of Mental Health found reason to publish an elaborate bibliography entitled *Violence at Home* (Lystad, 1974). Among those included in this bibliography, O'Brien (1971) reported spontaneous mention of overt violence in 24 of 150 interviews of divorce-prone families, and Levinger (1966) found physical abuse a factor in divorce in 20 percent of middle-class and 40 percent of working-class families. A national survey (Mulvihill, Tumin, and Curtis, 1969) revealed that one in four men and one in six women approved of slapping a wife under certain circumstances, but lower education and social class were closely correlated. Gelles (1974) reported that violence was a regular and patterned occurrence in 20 percent of families. Bronfenbrenner (1958), Kohn (1969), Steinmetz and Straus (1973), and Kohlberg (1964) are only a few among many researchers in social psychology and social psychiatry who have reported more use of physical punishment and violence among working-class parents than among middle-class parents. Middle-class families do experience violence, but their violence appears to be less publicly visible, less frequent, more restrained and controlled, and less lethal. In a later paper on violence and pregnancy, Gelles (1975) does not indicate the social class of the

eighty families interviewed, but the inference can be drawn that most were of lower socioeconomic status. Violence, he says, occurred during pregnancy in about one fourth of the families reporting violence. Among the factors contributing to assaults on pregnant women, he cites sexual frustration; a family transitional state of stress and tension; biochemical changes in the wife, making her more critical of the husband; and the defenselessness of the wife. He concludes: "Locating a family where a pregnant wife has been assaulted could serve as an indicator of this family's use of physical aggression as a response to stress and the likelihood of future occurrences of violence toward children" (Gelles, 1975, p. 84). Such a comment leads to questions about public policy concerned with family crisis intervention, which is still more discussed than implemented and researched.

### Importance of Domestic Disturbance Calls

The usual caveat about domestic homicides and the incapacity of the police to do much about them appears in almost every annual report from the FBI: "Police are powerless to prevent a large number of these crimes. . . . The significant fact emerges that most murders are committed by relatives of the victim or persons acquainted with the victim. It follows, therefore, that criminal homicide is, to a major extent, a national social problem beyond police prevention" (U.S. Department of Justice, 1971, p. 9). But new rationales and new empirical evidence suggest rejection of this assertion. Some time ago we wrote about this issue as follows (Wolfgang and Ferracuti, 1967, pp. 301-302):

A particularly intriguing innovation suggested as a special function of community centers is the "emergency domestic quarrel team" of specialists. With a staff of sufficient size and training to provide twenty-four-hour service on call, the team is viewed as capable of offering rapid social intervention, quick decisions, and accelerated resolutions to families caught in a conflict crisis. Traditionally, the police are called into service when domestic quarrels erupt into public complaints. The police are trained principally to interrupt fights in verbal or physical form. Their chief func-

tion is to prevent assault and battery at the moment of arrival, to arrest assaulters on complaint, and then to go about their business of patrolling their sector. It is well known that some of the most potentially dangerous calls police officers act upon are reports of domestic quarrels. About one fifth of all policemen killed on duty are those who responded to "disturbance" calls, which include family quarrels.

The suggestion of an emergency domestic quarrel team is meant to include the police as part of the group, primarily to protect the team itself from violent attack. After the initial danger has subsided, the police could withdraw, leaving the team of psychological and social work specialists to talk with the family, to suggest the best solution to the immediate problem, and [to] work out a program for a more enduring resolution.

It should be kept in mind that a relatively high proportion of criminal homicides are classified as emerging from domestic quarrels. These are acts usually committed indoors, not normally subject to observation by patrolmen on the street, and therefore considered virtually unpredictable and unpreventable. An emergency domestic quarrel team might, therefore, function from a community center as an effective homicide-prevention measure. Intervening in earlier stages of physically aggressive strife in the family, the team could conceivably thwart the progression of family violence to the point of homicidal attack. The strategies for resolving domestic conflict are details too specific to pursue further here, but, clearly, experience would accumulate to provide increasing sophistication. In addition to information shared in an adequate referral system, these teams would soon develop expertise in handling many difficult family situations. It should be further noted that twice as many homicides among blacks as among whites are known to develop from quarrels within the family, usually between husbands and wives. These are almost invariably lower-class, poor black families. The emergency teams to which we refer would

operate out of centers often located in areas with high concentrations of the black poor.

Various indices to measure the success of these teams can easily be imagined. Keeping in mind our focus on crimes of violence, one index of the value of emergency intervention could be changing rates of domestic homicides and aggravated assaults. Perhaps even rate changes in general throughout an ecological area would be influenced. After all, an unresolved family conflict may cause some family members to displace their cumulative aggressivity on close friends, neighborhood acquaintances, or even strangers. For we do not know the number of homicides and aggravated assaults recorded by the police as due to altercations which may have had their genesis in a hostile exchange in the family.

Stimulated by the work of Bard (1969), a family crisis intervention unit was established in New York City some years ago. The research design and findings were inconclusive; however, according to Bard and his colleagues, the training of police officers to handle family disputes appeared to be related to the following facts: (1) no homicides occurred in any of the 962 families previously seen by the intervention unit, (2) family assaults were fewer, and (3) there were no injuries to any officer in the intervention unit (Bard and Berkowitz, 1969; Bard and Zacher, 1971).

New data, as yet unpublished (submitted to the Police Foundation by the Northeast Patrol Division Task Force, under the direction of Captain Robert Sawtell), yield empirical support for the hypothesis that family homicides might be reduced if more attention were given to police calls reporting a domestic disturbance. In this study (entitled "Conflict Management: Analysis/Resolution"), data were collected on homicides and aggravated assaults occurring in Kansas City, Missouri, during 1970 and 1971. In one fourth of the homicides and one third of the aggravated assaults, either the victim or the suspect had been arrested for a disturbance or an assault within two years prior to the homicide or assault in question. Even more striking is the fact that about 90 percent of the homicide victims and suspects had had previous disturbance calls to their address, and about 50 percent of them had had five or more such calls. The same

was true for assault victims and suspects. Unfortunately, in most of these previous disturbance calls, the police had done nothing more than prevent immediate physical injury, and there had been few arrests or court convictions. When the family members were asked whether they expected to repeat their disturbance behavior, two thirds said yes. And, apparently, future disturbances often result in family homicide. The best set of variables to predict a future domestic killing or aggravated assault includes the presence of a gun, a history of previous disturbance calls, and the presence of alcohol. Moreover, when physical force was used in a family disturbance, known threats to do so had preceded it in eight out of ten cases.

The study in Kansas City is a complex and elaborate one, and I hope it will soon be published. My major reason for mentioning it is to suggest that with appropriate intervening counseling, referral, and treatment of family disturbance calls, there is a probability of reducing not only domestic homicide but family violence in general.

### Conclusion

Violence in the family is partly a reflection of violent expressions in the culture generally. But serious crimes within the family are most commonly related to subcultural values that either do not inhibit physical responses or else actually condone and encourage them. Perhaps if the residential propinquity of the actors in a subculture of violence were broken up, so that the members who share intense commitment to the violence value were dispersed, the intergenerational and intragenerational communication of this value system would not continue. Once the subculture is disintegrated by dispersion of its members, aggressive attitudes are not supported by like-minded companions and violent behavior is not regularly on display to encourage imitation and repetition. Dispersion does not necessarily imply massive population shifts, although urban renewal, slum clearance, and housing projects suggest feasible methods. Renewal programs that simply shift the location of the subculture from one part of a city to another do not destroy the subculture. In order to distribute the subculture so that it dissipates, the scattered units should be small. Housing projects and neighborhood areas should be small microcosms of the social hierarchy and value system of the central dominant culture. It is in homogeneity that the subculture has strength and dura-

bility. (Some of these same notions have been presented by Cloward and Ohlin, 1960, in their discussion of the conflict subculture, and by McHugh, 1964, in his paper on the inmate culture in prison.)

Straus (1974) has eloquently written about aggression in families, especially about the notion of "leveling," in the sense of giving free expression to one's aggressive feelings in the natural family setting (in therapy referred to as the "ventilationist" approach). He argues compellingly and convincingly against it and suggests instead that "the greater the degree of intellectualization the lesser the amount of physical aggression" (p. 27). The "rationality of middle-class life" and the "rules of civility" which have evolved through the ages in the name of humanism are viewed as significant elements in the reduction of family violence.

Prescott (1975) has synthesized cultural and laboratory studies of punitiveness, repression, and violence. In a compelling argument for more freedom of pleasurable physical expression and less repression of sexual behavior, Prescott links crimes of violence, physically aggressive behavior in general, child abuse, and homicide with deprivation of physical affection and repression of adolescent sex behavior. In rather strong declarative terms he asserts: "I am now convinced that the deprivation of physical sensory pleasure is the principal root cause of violence. Laboratory experiments with animals show that pleasure and violence have a reciprocal relationship. That is, the presence of one inhibits the other. A raging violent animal will abruptly calm down when electrodes stimulate the pleasure centers of its brain. Likewise, stimulating the violence centers in the brain can terminate the animal's sensual pleasure and peaceful behavior. . . . Among human beings, a pleasure-prone personality rarely displays violence or aggressive behaviors, and a violent personality has little ability to tolerate, experience, or enjoy sensuously pleasing activities. As either violence or pleasure goes up, the other goes down" (p. 11).

Sensory deprivation, lack of affection in infancy and adolescence, sexual repression, and punitiveness are forms of reduced alternatives and expressions of freedom. It may be noteworthy that Eleanor and Sheldon Glueck (1950) found a similar relation between lack of affection by the mother, erratic supervision by the father, and delinquency among boys. I would add further that the psychological and sociological ingredients of



the subculture of violence are characterized by physical punishments and a variety of sensory and cultural deprivations, thus reducing alternative behaviors and pleasurable responses, promoting promiscuity but not affection and bonds of intimacy, and restricting the mobility of the mind and thereby reducing individual freedom.

Sociologically, a subculture of violence thesis may be used to explain much of this violence that is generated by a value system geared to a ready response of physical assault on ritually acknowledged cues. When the repertoire of response is limited to relatively inarticulate capacities, when physical punishment of children is common practice, when the rational civility of middle-class values of respect for person and property are undeveloped or missing, when parental affection for and caring supervision of children are absent, the major modal categories of violent behavior are more likely to emerge in expressions that violate both codified law and dominant communal norms.

Affection and firm supervision of children cannot be legislated. Teachers and significant others cannot, by administrative fiat, become kind and gentle. But activities can be promoted in the home and school to socialize children—even those from a subculture of violence—into nonviolence, to desensitize them to linguistic and behavioral cues that evoke violence. Pleasurable rewards and lucid, certain, but not severe sanctions promote the greatest probability of nonviolent conformity to social rules of conduct. If, as Prescott claims, pleasure and violence are antitheses, the message is as old as it is clear and is buttressed by evidence from all the healing arts and behavioral sciences: Give the infant, child, adolescent, and adult family member affection, recognition, and reward for being alive and unharmed to others, freedom from excessive restraints, pleasures for the body, and a broad repertoire of verbal articulating ways to respond to stimuli in all dramas of social interaction.

# Violence in the Schools

*Robert L. David*  
*Jürg K. Siegenthaler*



Violence in public schools has probably occurred in some form or other ever since the emergence of the schools themselves. Yet it is a topic that must be approached with caution, since emotional responses to public school violence tend to obscure possible explanations of its origin and causes. Such responses from many teachers, school administrators, parents, police, and local citizens are understandable, however, in view of the fact that the book *Blackboard Jungle* of the late 1950s appears tame in comparison with school violence of the 1970s. What emerged as a troublesome but incidental problem some twenty years ago, and a problem restricted to certain inner-city areas ten years ago, now seems to threaten the very core of the educational system.

Statistics of a federal government survey indicate the fol-

lowing increases in public school violence in the United States between 1970 and 1973 (Bayh, 1977, p. 9): homicide increased by 18.5 percent; rape, 40.1 percent; robbery, 36.7 percent; assaults on teachers, 77.4 percent; assaults on students, 85.3 percent; burglary and larceny, 11.3 percent; weapons seized, 54.4 percent; drug and alcohol violations, 37.5 percent. The National Education Association has estimated that, each year, over 100,000 public school teachers have their personal property vandalized and that approximately 70,000 teachers are physically attacked on school premises and injured seriously enough to require medical attention (Bayh, 1977, pp. 11-12).

Significant increases have also been registered in student acts of vandalism directed toward the public schools—thus indirectly the educational institution—as well as other public property. Property destruction caused by students occurs most often in the form of arson, followed by broken windows. Window breakage, for example, represents the second largest amount of an estimated annual \$590 million spent nationally for vandalism on public schools (Bayh, 1977, p. 36). The expenditure for replacing broken windows may not appear high within the annual budget of a single school when compared with one successful arson or bomb attempt. One such vandalistic act resulted in a loss of one million dollars when a senior high school was destroyed in an affluent suburb of Washington, D.C. Another major student act of vandalism was the destruction by arson of \$100,000 worth of property and equipment at an elementary school, which ultimately had the effect of costing \$55 per student in that year. Concomitantly, the Insurance Company of America estimates that nationally 60 percent of all school fires are caused by vandals ("An Attack on Vandalism," 1973, pp. 43-44).

Some people do not associate criminal acts—such as murder, extortion, rape, loan sharking, protection rackets, and arson—with children, because they do not believe that children are capable of adult-like social organization and behavior. The widespread belief that children cannot be made responsible for their actions, because they are not mature enough and thus do not understand the consequences of their actions, is a major hindrance to the resolution of the problem of violence in public schools. The fact that other Western societies report widely differing degrees of school violence might lead to the conclusion that their perceptions and resolutions of the problem are different from those in the United States. Under this assumption, we

have chosen to concentrate on the special way in which American children are socialized into school and society, and we will highlight these findings with examples from societies with different rates of incidence and relative intensity of violence in the public schools.

In the 1960s critics of education such as Friedenbergl (1965), J. Henry (1971), Kohl (1969), and Kozol (1968) shared many similar views of the public educational institution. For example, they were all preoccupied with the schools' superiority over the students. In their view, the schools resembled prisons where students were not only socialized into acceptance of and obedience to authority and into conformity to traditional norms and values but also instilled with the fear of failure, a love of competition, and a reverence for work routine. These critics generally believed that the educational institution was more powerful than the sum of the people within it, which led them to the obvious yet, we believe, partially mistaken assumption that students were being dehumanized, victimized, and overpowered by the enormity of the educational institution. The persistence of the belief in the student as victim has not abated (see, for instance, Lopate, 1975; and Schrag and Divoky, 1975).

The acceptance of the notion of students as victims has led many proponents and critics of education to the general belief that social or, in this case, institutional power is unidirectional. Among those who subscribe to this notion, two basic underlying assumptions about schools and students are made. One is that the educational institution is more powerful than the students, a view overwhelmingly held by those who control and those who criticize the schools. The other is that students are subadults and victims; proponents of education, who feel that students need socialization through adult direction and control, regard them as subadults; and critics of education, who attempt to assess the results of such adult guidance, regard them as victims. Proponents and critics alike appear to agree, however, that students are not total or complete social beings; since they lack the completeness of a collective social order that adults share; namely, a life experience and culture of their own (in addition to the sources already cited, see Erikson, 1963, 1968; Hall, 1904; Keniston, 1971; Parsons, 1956; Reich, 1970; Roszak, 1969). Although they are not without experiences and consciousness, theirs are generally defined as a student subculture. (We have chosen the term *student subculture* rather than

subgroup, youth culture, youth subculture, contraculture, counterculture, peer group, adolescent society, peer society, or youth group. Although each has been defined differently by various writers, it is impossible to make any meaningful distinction among them except from the theoretical perspective or personal bias of the writers.) But since a student subculture assumes multidirectional and multiple spheres of social power (rather than the unilateral power assumed by the proponents and the critics of education), the views of the student as subadult and the student as victim can be only partially correct. The educational institution does, without doubt, have enormous power over the students and, as many studies have shown, does define and influence the present and future of the students (Graebner, 1972; J. Henry, 1963). There is an element, however, that appears to be frequently ignored sociologically: the nature of the students' response to institutional power. Their response is manifested primarily in the form of antisocial behavior, which is functional for their subculture and instrumental in counterbalancing the power of the educational institution. The student subculture has generally been analyzed as the product of a period of transition, characterized by personality growth through adolescence. On the one hand, it has been regarded as a subculture with a positive influence on the students in their adjustment to adulthood and, on the other hand, as the cause of inadequate personality development, overconformity, and lack of object orientation (Coleman, 1961; Gans, 1962; Gordon, 1957). But one of the student subculture's most important functions appears to have escaped analysis; namely, the rational and socially complete effort of the students to collectively represent individual needs to cope with the power of the educational institution.

Subcultural characteristics, like the characteristics of larger social systems, evolve historically as a result of the internal and external needs of and social demands made on people. From this practical historical perspective, it is possible to recognize that the high school subculture, which has been a focal point of concern of both proponents and critics of education, does not have its genesis in adolescence or the high school stage of education but, rather, in the early days of exposure to the school—in grade school. Dillion and Grout (1976) found that grade school students begin to dislike school when they perceive abuses of authority by their teachers. They also found that grade school students are alienated by the school rule-making

process, which excludes them, and soon begin to resent prevailing student-teacher power relationships. One might then assume that both the students as individuals and the student subculture become more sophisticated and complex the longer the students are exposed to the school's institutional power as well as to the larger social structure. The following reexamination of the student subculture and manifestations of student antisocial behavior from a sociocultural perspective will reveal the flaws in the notions of the victimized students, only partially acculturated students, unidirectional social power, and the students' inability to respond collectively to institutional power. All too often, the prevailing explanations of school violence are subject not only to a unidimensional analytical approach but also to parochialism, because these explanations focus on a single set of cultural parameters. In our reexamination and assessment of the phenomenon of school violence, we will draw upon a number of cross-cultural comparisons. By comparing American student antisocial behavior with that of pertinent cases in other countries, we can highlight the relevance of our perspective.

### Development of Student Subculture

The antisocial actions of students during the first three years in grade school—commonly called rowdy, mischievous, or vandalistic behavior—are, from our perspective, not incidental individual actions but, rather, collectivized individual attempts to test the power of the school and the teachers. This is not to imply, of course, that students between the ages of 6 and 9 commit acts of disobedience out of an intellectual understanding of their antisocial behavior. Children in this age group do not have an adult's perception of the school's purpose. Since these young students lack the experience of having tested individually and collectively the school's authority, their subculture is unquestionably in a state of social infancy. Nevertheless, by the age of 6, children generally do understand and know that they must go to school. They also sense that their parents cannot take them out of school without some form of permission, so that—despite extensive parental involvement in the school—their parents are equally subject to the school's higher authority. In other countries, where parent-teacher linkages are much rarer than in the United States, the child perceives the division between domestic and school "worlds" even more quickly. The division is marked by a socially unquestioned acceptance of the child's new life

stage, which, according to a school statute in Switzerland, is "to prepare young people for useful activity. [Swiss public education] provides pupils with the necessary intellectual or vocational knowledge. . . . The family, through its influence on the children, will collaborate with the school, helping it in its task and observing school rules and customs" (quoted in Egger, 1969, p. 729).

The child of 6, then, who has believed that his parents exercise total social power, now becomes aware of a new power—the power of the school. Out of this awareness seems to emerge a clear understanding among young students that, except for their peers, they are alone in confronting the institutional power of the school, to which they are legally subjected. Their struggle to understand and cope with this situation is partly demonstrated by their attempts to keep happenings at school secret from their parents. After all, most parents tend to blame the children for conflict at school, and, from the children's perspective, the parents do not have the power to help them. Already these young students have longings which appear in a multitude of fantasies. They wish that they did not have to go to school and were adults free from school. They dream that school will close or the teachers become sick. In their play they are teachers exercising their will over others, and in their songs they compose verses such as this (sung by a second grader, to the tune of "Battle Hymn of the Republic," when she was asked whether she had learned any new songs at school):

*We are here for the burning of the school,  
We have tortured every teacher,  
We have broken every rule,  
We have set the school on fire,  
We have killed the principal,  
Our truth is marching on!*

From the fourth through seventh grades of school, the student subculture takes on a more definite form. Most of these older students can no longer be trusted to conscientiously monitor classrooms and inform on unruly classmates. New examples of student disobedience appear: the exclusion of teachers from the students' confidence and primitive attempts to disrupt the lessons by use of water guns, rubber bands, paper wads, and bean shooters, to name but a few. In these grades most students still act individually to counter the school's rules and individ-

ually experience punishment for misbehavior. But although much disruptive behavior in this age group can still be related directly to the individual student, indicators already surface that the student subculture is increasing in complexity as students learn to pass notes, punish their peers by collective ostracism, and adopt and create their own language and dress style. In short, the individual student begins to conform to the germinating peer subculture that increasingly dominates his school life.

By junior and senior high school, the student subculture takes on all the structural characteristics of a complete social entity. It has a shared history, its own language and dress style, and a set of normative values that do not necessarily conform to the values of the larger society. At the high school level, the separation between teachers and students is especially pronounced, and the teachers are almost totally excluded from the student subculture. Although student cliques compete with each other for resources and recognition, they still collaborate in activities defying the school's rules to control students—for example, note passing, a form of behavior that requires enormous trust among peers.

Rowdy and mischievous student behavior constitutes the major discipline problem for teachers and school officials: "Most teachers would, I think, agree with me that we spend about 75 percent of our time disciplining the children and about 25 percent of our time teaching. Even the time spent in teaching is only about 10 percent effective because of having to stop several times during a lesson to speak to certain children" (Deutsch, 1960, p. 23). The mischievous acts of defiance are legion: smoking on school grounds, throwing grade books out the window, flushing "cherry bombs" down the toilets, making anonymous bomb threats, setting off fire alarms, turning over fire extinguishers, "accidentally" spilling noxious acid, making disruptive and untraceable noises, cheating collectively, falsifying permission slips, placing tacks on teachers' chairs, hiding the chalk and erasers, asking leading questions to forestall the teacher from continuing his lesson, and in general showing contempt for the teachers' authority by means of graffiti and other mischievous acts: "Sometimes we arrange for a 'locker slam.' We pass the word all morning that there will be a 'slam' at 12:00. Then, when we all go to our lockers before lunch, the person at the end of the line slams his door, and then all the others do, too, one-by-one, bam, bam, bam, bam" (quoted in Dixon, 1977, p. 14).



All such incidents share an underlying common meaning. This common meaning is obscured, however, because some forms of violence capture the public attention more readily than others. For example, school officials and society in general define vandalism as an especially acute problem—probably because of its cost: it reached a figure of \$151.5 million in the United States in the 1970-71 school year. We contend, however, that vandalism is not a qualitatively and causally different form of violence; rather, it is only one of the means of social control created and employed by the student subculture. Seen in these general terms, vandalism would merely be another way of combatting what students define as excessive institutional power.

Sociologists (see, for instance, Bettelheim, 1943; Goffman, 1961; Gouldner, 1954a, 1954b; Rawick, 1972; Schein, 1946) have routinely found vandalistic subcultural behavior among prisoners, mental patients, and workers in business and industry. Students also appear to build their own social structure in such a way that they can thereby collectively resist institutional power. This subcultural structure provides students with a collective identity and alternative norms and values concurrently with the power that enables them to undermine the effectiveness of the very institution that attempts to control them. Viewed in this light, the industrial-political term *sabotage* is perhaps more appropriate than vandalism. Any such disruptive force can be seen as one among many attempts at counter-control.

From the perspective of collective power, the function of the student subculture provides an alternative explanation for the causes of rowdy, mischievous, vandalistic, or violent behavior at school. This perspective takes us away from the individual level—from blaming individual students and the family or from the notion of letting hyperactive children outgrow their hyperactivity (usually by junior high school)—and leads us to a structural explanation of students' individual and collective behavior at school.

### Society and the Student Subculture

Thus far, we have argued that students create and build a subculture that best fits their needs in order to respond to the disproportionate amount of social power they perceive imposed upon them by the educational institution. In short, students are responding to an institution that they neither created nor control, using the same techniques of organization that adults fre-

quently utilize in the larger society. This view alerts us that it is the larger society which must be held causally accountable for the creation and persistence of the student subculture.

The traditional institutional approaches to school violence—such as continued and increased utilization of resources for deterrent hardware to detect and prevent vandalism, reliance on drugs for student control, modification of educational programs to cope with student misbehavior, and reliance on teacher training to handle troublesome students—cannot solve the problems of student antisocial behavior. These approaches require even greater reliance on institutional power and therefore, from our perspective, would perpetuate and escalate the very student antisocial behavior that is to be eliminated. Why do schools continue to pursue corrective policies that perpetuate the problems of violence and vandalism? Principally because they cannot effectively deal with the real source of the problems. Consider the source of social power that mandates conforming behavior. From the students' immediate perspective, it is the school; and from the school's perspective, it is the legal, political, and economic system of society. The students' practical response to institutional power is directed primarily toward the school, because this source of power is the only major one they perceive as tangible. For students, the legal, political, and economic system that defines the place of youth within society is so diffused that a focal point for rebellion appears only sporadically. Two cases in point are the "ban the bomb" movement of the 1950s and the peace movement directed against the Vietnam War in the 1960s. In both cases, youth protest against the larger society flourished simultaneously in both Europe and the United States but was relatively short-lived.

But youth protests against socially traumatic events like war and the prospect of war may simply be the outcome of more deep-seated feelings of social inadequacy and uncertainty. For in another cultural setting, Cole (1950) showed, for example, that the most disruptive Japanese students were those most likely to be dissatisfied with occupational opportunities. In line with this theory, the present rise of Japanese motorcycle gangs in Tokyo is being attributed to the fact that young people are dissatisfied with their future life chances (Wiseman and Field, 1976). In contrast, acts of intense violence are extremely rare among Swiss students—a fact quite plausibly related to the findings of a recent student survey (Casparis, 1975, p. 149); that is, 77 percent of the respondents said that school fulfilled the goal of securing their future "very well" or "fairly well" (although,

at the same time, the goal of promoting personal development received only 23 percent approval; dealing with social issues, 39 percent; initiating team work, 41 percent; and guidance toward independent judgment and action, 41 percent). In another survey (Meili, 1975, pp. 25, 26), 62 percent of the ninth-grade male students in Zurich "rather like going to school," and 85 percent of the same group found their school learning useful.

In the United States Jencks (1972) has shown that education per se does not guarantee students equal social and economic opportunities later in life, and Stinchcomb (1964) found that outbreaks of school rebellion can be closely tied to a form of "alienation" which occurs when a student's present performance is not clearly related to his future status. Howe and Lauter (1970), in a similar study, found that very young students of lower social class have feelings of inferiority at school. Such feelings develop mainly as a result of the contradictions between their social reality and the promise of social mobility and are not necessarily caused by inadequate socialization in the family or classroom. According to many researchers, these contradictions are the driving forces that shape the students' behavior at school and thus are the principal causes of antisocial student behavior. Bowles (1972, 1973) points specifically to the gap between the stated and the actual functions and goals of the educational institution. Generally, education is supposed to be an equalizing force, guaranteeing equal opportunity. If this principle were transposed into action, however, the poor would have the best and not the worst schools and teachers, which would help compensate for the social inequities and deprivations. Clearly, then, the goal of public education is not to change inequality of opportunity but to preserve the status quo of the present class structure in the United States.

In other Western countries, preserving the status quo finds a much more overt expression in the structuring and channeling of the students' education according to embedded, traditional career anticipations by class. The most important feature in that respect is the termination of obligatory schooling at age 15 or 16, with only a minority of young people extending their education through high school (*gymnasium*); that is, beyond the standard eight to nine years. During the 1960s many European countries made changes in this pattern; but even these reforms implied differential training tracks, leading to or at least suggesting diverse educational attainments and occupational statuses after school (Egger, 1969, pp. 731, 741).

Over the last decade, students in the United States have

begun to articulate their awareness that school perpetuates the status quo. One such example is illustrated by a group of high school students in their handbook for disrupting and destroying schools:

This pamphlet is not written for people who are not yet sure whether school is good or bad. It is written for students that realize the way that compulsory education and grades destroy the natural curiosity so many children feel, who realize how the tracking system keeps the poor people and minorities in our society on the bottom while keeping the rich and powerful on the top, who realize the danger of teaching complete obedience to authority, and who are fed up with the racism and sexism in schools. It is written for students who have "gone through channels" trying to correct these problems and who are tired of helplessly waiting while the schools destroy more and more minds each day. It is written for young people who realize that because they are trapped in school they don't have a chance to learn what they need to know to create a free and good life [*School Stoppers Textbook*, 1976, p. 8].

Student awareness that the educational institution perpetuates the political status quo is also a factor in other cultural settings. A reflection of this awareness was the increase in "school-stopping" incidents during the 1960s, a period of youth radicalism which preoccupied political discussions in many Western countries. In the early 1970s these incidents declined—possibly because of the ebbing of domestic radical movements as well as the alleged consciousness of students that more quiescent, serious learning was necessary to obtain a job at a time of economic recession. However, a renewed rise of student anti-social acts has been observed lately as the economic recovery in several Western countries has been sluggish, leaving those societies with unprecedented high levels of youth unemployment.

### Conclusion

There is throughout a *Catch 22* element in the disruptive and violent student actions. Given the present state of the school—caught between students and the legal, political, and

economic system of society—its only response is to survive by increasing its effort to control the students, which, in turn, intensifies the countercontrol response of the students to the school. It would then seem inevitable that education becomes impossible and that the schools look more and more like scarred battlegrounds, littered with wasted public resources.

Needless to say, the dialectical relationship that permits the perpetuation of student violence concurrently with oppressive institutional response cannot be fully explored in this short space. But the following examples illustrate the paradox of this relationship. First of all, when students are asked why there is persistent vandalism in public schools, they frequently reply that it is done for "fun." Although vandalizing a school may seem strange entertainment to an adult, it nevertheless illustrates the fine line between submission to and preservation of the social order and resistance to and destruction of the social order. In this example, vandalism is a student subcultural response to adult oppression; it can be regarded as a form of entertainment only as long as the perceived adult oppression exists. In other words, adult oppression must be ensured by the students in order to secure violence and vandalism—or "fun"—thus perpetuating both violence and adult oppression within the subculture and the larger society. Another example of this relationship may be observed in the behavior of students who participate in the burning of a school or encourage others to do it. After the destructive act, the very students are usually involved in demonstrations demanding that the school be reopened or rebuilt. In essence, students do build elements into their subculture that attempt to counter any authority. And, in their commitment to preserve their subculture, they are unfortunately bound to maintain its negative aspects as well as its more positive ones.

A definite solution to student violence, we have argued, lies outside the educational institution, a solution which can be controlled neither by the school nor the students. The two major forces that conceivably could narrow the gap between the school and students are the legal, political, and economic system of society, on the one hand, and the parents, who constitute only a partially independent force within the larger society, on the other. The prevailing economic and political forces are not likely to alter the status of youth or the possibilities for equal opportunity. The schools still have not been equalized (Bowles, 1972), and there has been little change in opportunity for social mobility (Jencks, 1972; Sennett and Cobb, 1972); in

fact, our political and legal bodies apparently are encouraging the educational institution to maintain and exercise even greater control over the students than it did in the past (Bayh, 1977). The parents also seem to be supporting the status quo by partially relegating social control responsibilities for their children to the school in a routine manner. In their willingness and eagerness to support and advocate the use of "counterinsurgency" measures to modify and control their children's behavior, the parents are accepting diagnoses of physical and mental unfitness as causes for antisocial behavior (Lopate, 1975; Schrag and Divoky, 1975). Hence, the lack of impetus for change from the outside will undoubtedly ensure the continuance of student violence as both the educational institution and youth struggle for survival.

Although there seems to be little hope for eliminating violence in public schools, it is conceivable that the intensity of student violence may be reduced. Our analysis and cross-cultural comparisons indicate that the level of violence or disruptions tends to be lower when students are treated as adults. Incremental changes toward recognizing students as participating members of society in their own right, rather than as appendages, pariahs, or victims, promise a solution in spite of the contradictions inherent in American society.

# The Aggressive Female

*Emilie Sobel*



The view of the human female as passive, masochistic, and submissive is a stereotype evolving from biology, ethology, sociology, Freudian theory, popular cultural myth, and private opinion, both male and female. As the often-cited Broverman studies (Broverman and others, 1968, 1970) have indicated, the mental health professional has not escaped from adopting this shibboleth. Even among professionals, sex bias (whereby dominance and achievement are regarded as a masculine trait while affiliation and nurturance are regarded as female) exists equally in males and females (Stricker, 1977). At the same time, there is increasing evidence that a "new" woman has begun to penetrate male enclaves in business, politics, the sciences, and crime. For example, the rate of increase in major crimes by women is surpassing that for males. Murders by adolescent girls have risen by 400 percent (Adler, 1975). One policeman, whose jagged scar

was inflicted by a woman with a straight razor, reports that he has been punched, kicked in the groin, and threatened by women. And police supervisors report that the women who are now riding patrol cars alongside men are as aggressive, as action oriented, and as risk taking as men (Adler, 1975). Is this new aggressive female an anomaly of nature and society, or has social castration by patriarchal society made her, until very recent times, an extinct species? Is the well-documented fact that woman is less aggressive a function of a performance or a competence (structural) decrement? Partial answers to these questions can be found in an examination of the existing literature in the biological, ethological, sociological, and psychological domains.

### Biological Determinants

The biological determinants of female behavior represent structural givens, which can provide some clues to the parameters of female aggression. Gonadal steroids have been implicated in sex differences in mammals. Males, whose primary steroid is the androgen testosterone, have about ten times more of this substance than females have. Women have a complicated gonadal steroid pattern, with a surge of testosterone production premenstrually and around ovulation, a time when estrogen levels are also increased. Masculine behavior is influenced by the effect of testosterone on the central nervous system; similarly, female behavioral patterns are under the influence of hormonal variables (Bardwick, 1974).

Menstrual cycle and mood are interrelated (Benedek and Rubenstein, 1942; Ivey and Bardwick, 1968). While depression, irritability, anxiety, and withdrawal are higher premenstrually, at midcycle women become more outer-directed, self-confident, and alert. Bardwick, who reviews this literature, cites one study that establishes a relationship between the menstrual cycle and aggression; in this study half of the women who had committed suicide or perpetrated a criminal act were in the four premenstrual days (Dalton, 1964). Women using oral contraceptives, which stabilize steroid levels, display no significant emotional fluctuations. One interesting finding by Oakes (1971) provides a physiological underpinning to the frequently evoked distinction between aggression and self-assertion. Using the prisoners' dilemma, where one can play competitively or cooperatively, he found that women who were not taking oral contra-



ceptives played more competitively midcycle than premenstrually. Competitive behavior did not equate with hostility; instead, it reflected the self-esteem of the estrogen peak of midcycle, when these women scored high on personality measures of dominance and self-confidence. At other phases of the cycle, self-descriptions of nurturance and affiliation predominated. Bardwick speculates that the affect differences reflect the interactive effects of (1) high levels of testosterone and estrogen midcycle and (2) high levels of testosterone with low levels of estrogen and progesterone premenstrually. Thus, a more insidious hostile aggression may be expressed during the high testosterone-low estrogen phases; healthy competitiveness and assertion, during the high estrogen-high testosterone phases.

The aggression-testosterone connection lends itself easily to the conclusion that males, who possess the higher levels of testosterone all the time, are the more aggressive sex. Studies involving human males and primates document this conclusion. Male hormone levels are high in aggressive rhesus monkeys and low in homosexual males (Bardwick, 1974). In one study of twenty-one young male prisoners, the ten prisoners with the more violent and aggressive crime histories in adolescence had significantly higher testosterone levels (Kreuz and Rose, 1972). Experimentally hermaphroditized primates (androgenized prenatally), even though genetically female, display male-typed mating behaviors. The androgenized female has increased play initiation as a juvenile, is more rough and tumble, makes playful threats, and mounts females in a masculine stance (Money and Ehrhardt, 1976). In another study female monkeys were treated with the male hormone at 6½ months (Joslyn, 1973); before treatment males were dominant and more aggressive than females, whereas after treatment the reverse behaviors ensued. The females became more aggressive and subdued the two most dominant males. This behavior continued long after the administration of testosterone was discontinued.

While the testosterone evidence conclusively implicates a hormonal basis for the surplus aggression found in genetic males and premenstrual or androgenized females, it does not completely solve the chicken-egg dilemma of whether testosterone production influences aggression or whether aggression influences testosterone production. Bardwick does raise the issue of whether socialization can influence physiology and suggests that there may be an interaction rather than unidirectional physiological causality. Despite this admission, she still essentially ad-

heres to the classic psychodynamic assumptions regarding the significance of biology and early experience (Mednick and Weissman, 1975). Williams (1977), however, cites evidence that behavior can affect testosterone levels. Thus, when single male monkeys were placed in an all-female group, they assumed the dominant role. When these males were tested later, their testosterone level had risen to about four times its preexperimental level. In a situation where the dominance hierarchy was already established and they had to assume a nondominant role, their testosterone level dropped.

Stollar's (1972, 1974) work does much to further the general proposition that higher-level variables, rather than physiological status, mediate sexual identity. Stollar emphasizes a point unknown in Freud's time: that mammalian tissue starts as female in fetal life, regardless of chromosomal sex. It is through the intervention of the masculinizing hormone, an androgen, that the process of maleness progresses. Thus, the penis is essentially an androgenized clitoris, rather than the clitoris an inferior penis. On the brain level, the same condition for masculinization of behavior ensues: without androgen at a critical period, masculine behavior will not occur. Intersexuality (a significant shift of one or more of the criteria for determining sex in the direction of the opposite sex) can be multidetermined. Thus, Klinefelter's syndrome (too many sex chromosomes) or Turner's syndrome (too few), gonadal dysfunction, hermaphroditic appearance of external genitalia, and disruption of normal sex hormone production are all distinct pathways which can determine "intersexuality."

Stollar contends that psychological forces, rather than physiological givens, are crucial in forming gender identity. He provides clinical evidence, for example, that two siblings who were chromosomally male were born with normal male internal sexual apparatus and testes but had external female genitalia. Diagnosis of true sex was missed at birth, and they were assigned to a female sex and were unquestionably feminine psychologically. When the true diagnosis was made at latency, the parents decided to have the children remain girls; therefore, through hormonal and surgical treatment, female anatomy was created. There were no significant psychological problems. In other cases, where the gender change did not coincide with the individual's core gender identity (which may be fixed as early as the first year of life), the subjects did have psychological problems. Stollar's work does not obviate the role of hormones, but

it does cast serious doubt on the validity of extrapolations from biology to female behavior. In the aggressive-assertive sphere, core gender identity and the concomitant cognitive perception of behavior appropriate to the sex role may be as important a determinant in the incidence of aggressive behavior as is hormonal fluctuation.

### Ethological Evidence

Culture and ethology provide further information upon which to build an understanding of female aggression and its lack. Although, ethologically and cross-culturally, the aggressive female is a rarity, the conclusions that can be drawn from this fact are ambiguous. Lorenz (1966) builds on Darwin's observation that sexual selection, the selection of the best and strongest animals for reproduction, was furthered by the fighting of rival male animals. The male bison, antelope, or horse is a violent fighter and defender of the herd and family. This has resulted in selective breeding for hard rivalry fights among males. Thus, the most aggressive and physically strong animals in both human and subhuman species are male. In addition, "demonstrative" behavior, which involves aggressive display by the male, results in mating patterns where male and female resort to polarized dominance-submission behavior. For example, the female cichlid can mate only with an awe-inspiring and therefore dominant male, whereas the male can mate only with a submissive female. The male of this species can treat his partner roughly and display sexually motivated behavior at the same time. However, if the female is not impressed and awed by her partner, she attacks him ferociously and cannot react to him sexually at all. Thus, aggression and sexuality are compatible in the male but incompatible in the female.

What does the bison or the cichlid have to do with, for example, an urban, educated woman? Interestingly, a pattern of behavior similar to that of the female cichlid can be observed clinically. One patient of mine, Joan R., is fully competent in her office when only her supervisor is around. When the male coworkers, all college graduates, are in from their fieldwork, however, her mind "blurs" and she cannot understand her tasks as clearly. This same young woman spends her spare time searching for a man but will mercilessly attack a male companion if she feels that he is inadequate in some way. When she has assertive or success fantasies, she feels strangely masculine

and uncomfortable. She fears success and loss of her potential as a feminine companion if she succeeds.

Even though the mating patterns of this young lady and the cichlid fish seem strikingly analogous, one must be wary of "wild ethologizing." For every female patient whose courtship behavior parallels that of the cichlid (or male who resembles the cicada killer wasp), there is a person who manifests aggression and sexuality in an opposite manner, by competing with men on every possible occasion or by being perfectly capable of completing the sex act with a passive and denigrated male partner. Thus, ethological analogies are sharply limited by the plasticity and variability of the human female, whose behavior varies across situations. This phenomenon does not obtain in the animal kingdom, where behavior is more rigidly programmed and will forever remain unmediated by the symbolic order.

### Sociological and Psychological Factors

Even if we acknowledge, with Lorenz, that the male of a species is more *ready* to discharge aggressive energy in fighting, the *performance* of aggressive behavior still is affected by an interaction between culture and personality. Parental attitudes, societal dictums, and the like, form what Hartmann, Kris, and Lowenstein ([1949] 1964) have referred to as "institutional regulation" of behavior. These attitudes and dictums are internalized in the growing child and transmute ethological and biological givens. Although Whiting and Pope (1973) found that boys tend to seek dominance more than girls and are significantly more aggressive physically and verbally—whether reared in Kenya, Okinawa, India, the Philippines, Mexico, or the United States—Mead's (1935) findings support the environmental hypothesis and call into question the uniformity of sex roles across cultures. In the Arapesh, for example, males and females both exhibit a temperamentally female pattern, while in the Mundugumors both sexes are typically masculine.

Social learning theorists, as exemplified by Bandura and Walters (1963), present evidence from the laboratory that aggressive behavior can be shaped by social forces through identification, emulation, and modeling. A model who possesses rewarding power will be imitated. Furthermore, girls show a great readiness to imitate the behavior exhibited by an opposite-sex model. This finding suggests that the widely noted passivity of

females could be a product of acculturation in a patriarchal society, where cross-sex behavior is discouraged; such behavior could occur, however, in opportune circumstances. That differential social patterning for aggressive behavior is possible in the male sex as well is documented by the fact that parents of non-aggressive boys tend to disapprove of aggression, while parents of aggressive boys condone aggression directed at siblings and peers (Bandura, 1960).

In a longitudinal study of early mother-child interactions, Moss (1976) found that the mothers reacted to girl infants in one way and to boy infants in a different way. That is, the mothers reinforced verbal behavior in girl infants, whereas the greater irritability of the male infants elicited physical interactions. (A mother may later come to classify her male infant's irritability as "maleness.") The fact that different-sex neonatals can elicit different maternal reactions seems to explain how parents may reinforce different traits in male and female infants. Studies on neonatal sex differences, however (the finding that girls have greater sensitivity and a lower pain threshold, while boys are more active, evolve from studies that are methodologically suspect and unsubstantiated (Williams, 1977). Maccoby and Jacklin (1974), who have reviewed the literature on various measures of childhood differences (measures such as dependency in young children), found that two thirds of the measures showed no sex difference. One study, however, did show that mothers tended to encourage sons to separate, explore, and become autonomous; in contrast, they tended to maintain a closer interpersonal bond with daughters (Lewis, 1972).

In recent years it has become fashionable to hold to an environmentalist point of view and attribute observed sex differences to differences in socialization pressures on the two sexes (Williams, 1977). The lesser aggressivity of females is attributed to the fact that direct aggression is discouraged in females even though it is equally potent as a drive in females. Some investigators (for instance, Feshbach, 1970) hold to the view that active aggression in girls goes underground, only to emerge in an alternative and less direct form, such as cattiness or verbal aggression; and a few studies do support the fact that boys are higher in physical aggression but not in verbal aggression. On the whole, however, such a distinction is not borne out by most of the studies. Bandura (1965), for example, found that boys produced more spontaneous imitations of an aggressive model but that girls produced a virtually equal number of

aggressive acts when the children were rewarded for their imitations. This finding demonstrates that girls have a potential for aggression, although it does not explain why (whether because of "nature" or "nurture") the girls showed less aggression than the boys before they were rewarded. It does cast doubt, however, on the conclusions that can be drawn from such classical and widely cited studies as that of Kagan and Moss (1962), who employed a longitudinal design to study eighty-nine white children from childhood to adulthood. They found that females maintained a high degree of passivity and dependence from birth to 14 years; they also found a high correlation between childhood and adult passivity and dependency in females. In men they found the same relationship to aggression and expression of anger. Sampling bias is an inherent feature of longitudinal research. The subjects for Kagan and Moss's study went through critical periods of socialization during the 1950s. Such a study does not tell us whether male aggressiveness and female passivity are stable, immutable personality dimensions or whether they are a product of the cultural milieu of the 1950s. Bandura's demonstration that the expression of aggression is manipulable in the laboratory suggests that an environmental explanation is plausible. This does not negate biological differences, but it may account for the attenuated expression of female aggression in many situations.

The sex-role stereotypes that infiltrated the psychological literature of the 1950s and 1960s arose not from the fact that sex differences have been found (Maccoby and Jacklin, 1974; Tietlebaum, 1976; Williams, 1977) but from the way in which these documented differences are dealt with—particularly as related to female aggression. McClelland (1965), for example, draws fanciful assumptions from the literature on sex differences. First, he reviews the Kagan and Moss study and a large body of other studies and, from a complex body of data (showing, for instance, that men have greater mechanical aptitude and interest, greater analytical and manipulative ability, and field-independent spatial ability), he concludes that women are more "complexly interdependent" with the world, whereas men seek independent achievement. He evokes an explanation involving cultural training based on biological biasing, but he does not stop at this. Girls, he contends, are penetrated and experience painful menstruation and childbirth, while boys experience the phallic tumescence-detumescence cycle—which in some obscure way affects their psychological reaction. McClelland makes use

of a metaphor of bipolar opposition, in which masculinity and femininity are considered as opposing constellations of traits with enigmatic origins in the imagery of sex and reproduction. He goes on to suggest that women should be made to feel proud and "prefer the feminine interest in interdependent relationships." Male single-minded assertive attacks on objects have real limitations, and women should not regret that such an approach is not for them.

Erikson (1968) is another psychological author whose conclusions display bipolar thinking unwarranted by the findings. In an observational study utilizing 150 boys and 150 girls, Erikson gave such things as blocks, animals, people figures, and cars to his subjects. Asked to construct a scene, girls constructed "peaceful" enclosed scenes, making use of "inner space," while boys constructed "aggressive" exteriors such as scenes of street action. Erikson speaks of those results (which may merely reflect selective acculturation in the use of toys; see Marmor, 1973) in terms of "male" and "female" configurations. He quickly extrapolates from his interesting observation to add "aggressive-peaceful, male-female" inner-space-outer-space dichotomies, which add complex connotative meanings to his results. He then makes speculations about the state of the world; decrying the "male" competitive escalation and acceleration of technical progress, he concludes that a better answer is to return to the "domain of women and of the inward mind" (p. 318). Thus, Erikson, McClelland, and others engage in sweeping speculations on the basis of problem-solving-task data which can be explained far more parsimoniously. They thereby further the stereotypical thinking on the part of psychologists about the aggressiveness-assertiveness factor in females.

The sex differences in spatial ability are a case in point. A more economical explanation can be evoked if chromosomal facts are considered (Galenson, 1976; Williams, 1977). Spatial visualization may be a recessive trait on the X chromosome from father to daughter, mother to son. Males and females may be biologically programmed to follow different developmental lines. Even though they reach the same end point, they do so by using different cognitive strategies. The visual acuity of newborn males may be greater than that of females, while the reverse holds true for auditory acuity. There is also evidence of earlier elaboration of left hemisphere dominance in girls, which may facilitate their verbal development at the expense of the development of nonlinguistic capabilities. This early verbal com-

petence can cause girls to prefer the verbal mode (Williams, 1977, p. 139).

Broverman and his associates (1968) attempt to explain the sex differences in cognition by evoking a physiological explanation involving the sympathetic (or adrenergic) and the parasympathetic (or cholinergic) nervous systems. Both are sensitive to gonadal steroids. The male tendency to excel in problem-solving and analytical behavior, which requires a suppression of an immediate response, is facilitated by the cholinergic system, which is an inhibiting system. Estrogen inhibits the parasympathetic transmitter while testosterone does not. Men therefore can do tasks requiring inhibition of impulses better than women, because parasympathetic activity is greater. In the neonatally castrated rat, the masculinized female displays inhibitory spatial learning, such as occurs with normal male rats. Estrogen-injected male rats have increased activation and poorer spatial learning with more errors. This points to a biological substratum for the differences in cognition, as does the cerebral lateralization and chromosomal factors. It does not, however, evaluate the role of higher-level processes in mediating these differences in humans. Women are increasingly becoming successful in areas which call for supposed "masculine" cognitive abilities.

The fact that women have not been successful in these areas in the past may have to do with selective acculturation for achievement orientation and aggressive activity in relation to it. Socialization for males enhances options and encourages sex-role definitions that call for such direction. Women are discouraged in self-assertiveness, achievement orientation, and independence (Mednick and Weissman, 1975). Hoffman (1972) has focused on the fact that women do not develop adequate mastery skills. They strive to please rather than succeed. Horner's construct "fear of success" is relevant in this regard and has stimulated an energetic research effort. Although as of 1975 the results of this literature are inconclusive, some studies suggest that opposite-sex competition leads to a performance decrement for women. The expectancy literature clearly documents (Mednick and Weissman, 1975) that females have higher expectations that they will fail at tasks involving intellectual mastery. They attribute their success on such tasks to good luck and hard work but not to ability.

The sweeping conclusion that women have an aggressive-assertion defect, on the basis of the sex differences just deline-



ated, is due to an abstract norm of masculinity and femininity as bipolar characteristics. From the 1930s to the 1950s, efforts were made to ferret out a range of sex differences and develop standard measures of masculinity and femininity—on the assumption that there is a universe of stable and valid psychological differences between males and females (Lee, 1976). Even in the early 1970s, this kind of effort is reflected in the measures employed by Broverman and his colleagues when they demonstrate that women are considered passive and dependent by mental health professionals. Stricker (1977) makes the well-taken point that the nature of the data does not warrant such sweeping conclusions, but the language used in the initial stages of the project slanted the use of the scales. Thus, if males received a hypothetical score of 55 (out of a possible 60) on the logical-illogical pole, and females received a 50, these authors labeled the male score as the “logical” and the female score as the “illogical” pole, even though the actual scores were not radically apart on the continuum. When Broverman and his colleagues (1970) subsequently state that, relative to men, women are perceived to be dependent, subjective, passive, noncompetitive, and illogical, they again suggest bipolar opposites rather than matters of degree.

A variety of research efforts as well as the stereotypes of lay society reflect a semantic confusion which obscures the facts about men and women. “Male” and “female” *denote* the obvious documented biological differences between the sexes. “Masculine” and “feminine,” however, are used as constellations of personality traits which carry complex connotative meanings, already biased by the referential social order. As Ogden and Richards (1930, p. 214) point out, the ease with which any word can be used metaphorically indicates the degree to which, “especially for educated persons, words have gained contexts through other words.” “Competitive,” “aggressive,” and “logical” already metaphorically connote the masculine and are tied up with male persons by virtue of their meaning complexes. Thus, female activities—because they are female activities—are thought of as passive, less competitive, and less independent. Females pursuing such activities are then thought of as passive. The female who applies competent deductive and inductive reasoning in her concrete life world will probably not be called “logical,” whereas the male who applies similar reasoning in an office-related problem will be considered “logical.” “Competitive” has associations having to do with male-domi-

nated activities, such as the stock market and the ball game. "Competitive" means "masculine," and "masculine" means "competitive." Even though females may compete with one another in childrearing techniques and physical appearance, such activities are not considered competitive because they are female activities, which means noncompetitive. Thus, housekeeping skills may be thought of as passive activities, while sitting all day at a desk on Wall Street is thought of as active and aggressive because it is associated with the masculine life world. Again, in intercourse in the missionary position, the prone position of the female is thought of as passive, with imagery of submission and victimization, while the male is considered aggressive because of the male position on top. The vagina is in fact "active"; however, the prone position comes to connote passivity because it is associated with the female who makes use of it. Thus, there is a circularity of reasoning, due to polarization of meanings and their contexts, which muddles the speculation about female aggression.

### Psychoanalytic Perspective

A consideration of the psychoanalytic perspective on female aggression will serve to round out this discussion with theories that have an intrapsychic base. Freud (1925) begins his essay on the distinction between the sexes with an apology for publishing speculative views on woman. He felt that pure masculinity and femininity were theoretical constructions of uncertain content and would turn out to have general validity only when they came to be based upon more than the handful of cases upon which he drew. Later Freud (1933a) hedged about an immutable biologically determined femininity with passive aims and acknowledged a social influence. He had a rudimentary awareness that his Victorian women patients constituted a selectively biased sample and that generalization was limited. It was Helene Deutsch (and Marie Bonaparte, Karl Abraham, and others) who firmly established the biologically deterministic point of view, whereby narcissism, passivity, and masochism were considered to be rooted in woman's psyche. Deutsch's (1944) development of Freud's views became the "call to arms" of such psychoanalytic writers as Karen Horney and Clara Thompson and the nemesis of the modern feminist writers. The Deutschian position on female aggression goes as follows. Because the little girl's instincts are less active and aggressive than

those of boys, and because the clitoris is inadequate for whatever active aggressive drives the little girl does possess, her active impulses become inhibited. Inhibition of activity undergoes a turn toward passivity. The vagina is considered a passive-receptive organ, which the little girl will not be aware of until early adulthood. Renunciation of more phallic active aims during latency, however, prepares the girl for her ultimate and inevitable passive-receptive role. Motherhood and fantasies of humiliation and suffering are both considered natural outgrowths of the normal masochism which, in interaction with narcissism, marks the feminine character.

Deutsch's methodology is heavily reliant on biological concepts motivated by a strong evolutionary-adaptational bias which neglects the importance of learning and social factors (Wimpfheimer and Schafer, 1977). Such a position engenders the theory that narcissism and masochism are adaptive for the female of the species in rearing the young. Deutsch does concede to the interpersonal when discussing the father's inhibitions of his daughter's aggressive activity as he "tenderly" inhibits it; that is, she renounces her aggression for his love. That aggression, requiring an outlet, "endows the passive state of being loved with a masochistic character" (p. 253). Aside from this, Deutsch, in her search for a self-fulfilling instinctual drive toward propagation of the species, presents a value-laden assessment of female psychology. As a consequence, she overvalues woman's rich emotional life and, concomitantly, devaluates intellectuality in woman. "Warm intuitive knowledge" is compared to masculinization in intellectual woman's "cold unproductive thinking" (p. 290). Wimpfheimer and Schafer further point out that Deutsch makes use of the active-passive polarity, which results in dualistic thinking about what it means to be a man or a woman. As mentioned above, Freud himself was reluctant to dichotomize and was aware that such an endeavor resulted in hypothetical constructs of limited validity.

The active-passive dichotomy arose in Freud's thinking in relation to the active versus passive aim of an instinct in the anal phases. When discussing later phases of psychosexual development, he speaks of the phallic versus castration dichotomy. The phallic and active, on the one hand, and the castrated and passive, on the other, are polarities in the conflicts of the phallic stage of development. Freud himself (1933a) felt that it served no purpose to equate masculine with active and feminine with passive; however, they have subsequently taken on these mean-

ings. Freud did not intend the dichotomies that he created for theorizing about psychosexual development to have unlimited implications for all phases of later development and adult life. In spite of his original intent, however, feminist writers decry Freud's supposed phallocentrism and insist that he adhered to a strict separatism in his view of sex roles.

Hartmann, Kris, and Lowenstein ([1949] 1964) in a revision of classical analytic thinking on the subject of aggression, help to clarify the active-passive dichotomy that has come to be equated with the masculine-feminine roles. These authors point out that activity is not synonymous with aggression, since passivity also can be aggressive. Aggression refers to the wish to harm, master, or destroy an object, while masochistic strivings involve the desire to be mastered, harmed, or destroyed. The ego modifies aggression by directing it to substitute objects, by restriction and sublimation, rather than directly discharging it in fight or flight. Aggressive energy which is not discharged in this direct manner, as is the rule in civilized society, is internalized during development and can be used as cathexis of the superego and as a source of guilt feelings. Internalization may also lead to neutralization of aggressive energy in the ego. The capacity to neutralize large quantities of aggression can constitute one of the criteria of ego strength or high capacity of the ego to integrate. The internalization of nonneutralized aggressive energy, however, may be the hallmark of a weak or eventually masochistic ego.

By this reasoning, neutralized aggression in the ego becomes a factor in the ego's mastery of the world, while non-neutralized energy can aggressify or sexualize ego functions, producing neurotic conflicts in lieu of active control of the environment. In this context the masochistic, passive, dependent character whom Deutsch considers the prototypical and normal female becomes a regressive neurotic phenomenon—the result of unsuccessful resolution and sublimation of the psychosexual conflicts of the phallic and oedipal stages of development, rather than a normal progression. Whether or not society has fostered and reinforced this truncated development in woman is beside the point. Female passivity or lack of assertion-aggression can be seen as an unsuccessful transmutation of the normal pre-oedipal aggression of both sexes, rather than an immutable psychological absolute in female identity formation. Thus, "Freud was wrong whenever he regarded as essentially feminine that which is essentially neurotic" (Moulton, 1974, p. 285).

Jacobson (1964) provides a theory of normal preoedipal aggression as it furthers ego growth and selective identifications. During early stages of ego growth the child wishes to control and magically dominate the love objects upon which he depends. This desire is replaced by ambitious efforts toward realistic achievements. Under the influence of instinctual conflicts, these strivings become charged with aggressive energy and find increasing expression in competitive struggles with admired, powerful love objects and rivals. Partial introjections and selective identifications represent a compromise between the child's need to retain the symbiotic situation and opposing tendencies to loosen the symbiotic ties by way of aggressive, narcissistic expansion and independent ego functioning. Freud, too (1931), repeatedly emphasized that "the same libidinal forces are at work in male and female children" in the pregenital stages, with both active and passive trends present. It is subsequent biological factors during the phallic oedipal stages, Freud contends, that conduct active and in every sense masculine strivings into feminine channels. At this juncture Deutsch and the ego psychologists part company. Deutsch believes that female identity formation takes place at this stage; in contrast, Stollar and other contemporary writers on the subject believe that female gender is not a by-product of developing heterosexuality but originates at the early pregenital stage. Female identity then precedes awareness of the anatomical difference between the sexes and therefore does not by any means rest exclusively on genital comparisons. Little girls, then, establish their femininity well before they resolve or do not resolve their castration problems. The preoedipal development of aggression described above is as much a part of feminine identity formation as it is in males, and subsequent modification due to psychosexual conflict is a secondary phenomenon. The aggressive core (whereby aggression has to do with frustration, narcissism, early object relations and their renunciation, and identification with the aggressor) forms a natural contribution to ego development in either sex. Female masochism and passivity can result from unsuccessful oedipal resolution, just as the "macho" character of males can stem from phallic-level or even preoedipal conflicts. Stollar, for example, speculates that the surplus of male aggression may result from a counterphobic attempt on the male's part to establish male identity in the face of a regressive pull to the female. There is an exaggerated drive to separate from the mother, in reaction to a frightening pull to identify with this

earliest object. In contrast, the female does not have to engage in this kind of struggle. Thus, woman is given her identity by the earliest identifications and does not have to arrive at it tortuously by castration, humiliation, and renunciation, as the Freudians have said (Stollar, 1974). Identification can take place with an active, assertive mother, and this can be a healthy development.

Feminist writers often forget that psychoanalysts provide an anatomy of unconscious meanings based on infantile psychosexual conflicts. They are not prescribing a life-style or a phenomenology of female functioning in the here and now. Fennichel (1941) describes a case of a woman with disturbed reading. In analysis she discovered through free association that she was obsessed with productive men and the methods they used. She wanted to take something away from men. Ultimately her reading dysfunction had its roots in the fantasy that woman cannot perform masturbation the way men do and she had the unconscious wish to steal a penis. This is an example of the classical analysis of a woman which so easily becomes the red herring of the feminists. They contend that the linking of female assertiveness or lack of it to psychosexual origins is reductionism of the worst sort. What they forget is that the analysis of the unconscious fantasy will neutralize the aggressive energy tied up in it and ultimately release the ego function so that it can become conflict free. Ironically, the intent of psychoanalytic therapy for woman is liberation—liberation of aggressive energy for ego-syntonic use. Any therapist can easily see in his practice that masochism, envy, and the like, are not female prerogatives. Active-passive, symbiotic-autonomous, masochistic-assertive are opposites that apply universally in ego development. The vicissitudes of gender identity formation and the meaning it acquires in the unconscious during psychosexual development, however, may influence male or female patients differently. Societal attitudes intervene early in childhood via the parents and are internalized and transmuted in the course of heterosexual development. It is the therapist's task to unravel meaning complexes in either sex. While issues in therapy of self-assertion versus dependency and passivity can be regarded as functionally autonomous from sex-linked roles, in the neurotic patient they may not be.

The psychological health of woman has not been furthered by a living out of cultural fantasy roles. The menopausal, depressive, agoraphobic housewife and the unassertive "fear-of-

success" woman have been cultural casualties produced by the repression of female independence and aggression. The work of Sandra Bem focuses on the concept of psychological "androgyny," wherein masculinity and femininity represent complementary domains of positive traits and behaviors. In principle, an individual can be both instrumental and expressive, integrated into a balanced androgynous personality. Bem's laboratory studies (Bem and Bem, 1970; Bem, 1974) demonstrate that "androgynous" individuals of both sexes were able to be high in both independence and nurturance. Although Bem's work does depart from the bipolar thinking that has marred earlier research, it is not necessary to invent a new metaphor, *androgynous*, to bypass the semantic difficulties enmeshed in the connotative meanings of masculine and feminine. Instead, one can conceive of a sphere of ego functioning that does not depend on sex role. Competitiveness, aggression, logic, nurturance, and dependence are sex-role-free functions. It is only when this conflict-free sphere is instinctualized that an acting out of libidinal fantasies dominates the arena. The passive and submissive female "type" then appears, representing the personification of a neurotic conflict of a psychosexual nature. This "persona" is a stereotype which has pervaded Western culture but is essentially no less of a characterological or neurotic problem despite its large-scale prevalence than is the "macho" male with his surplus of aggression.

The aggressive-assertive female is both a possibility and an increasing actuality of human life rather than either a cultural or a psychological or an ethological anomaly. Human behavior is learned, motivated, and performed on the basis of complicated intrapsychic symbolic convolutions on the simple biological and cultural facts. They interact to produce an ongoing dialectic of person and situation variables. As practitioners we must know that the kinds of assertion and aggression that our female patients can potentially express are limited only by their organizing fantasy about what being female entails and the reality of permissible expression of aggression in a civilized world.

A dialectical theory of human development focuses on simultaneous movements along at least the following four dimensions: inner biological, individual psychological, cultural sociological, and outer physical (Riegel, 1976). At times, both in the history of the individual and that of the culture, development in any of these dimensions may not synchronize with that in the others. The development of a woman in the 1970s will

not be the same as one in the 1950s or the 1960s or any other historical period. Very early in development, biological "givens"—testosterone, earlier lateralization of the left hemisphere, estrogen peaks, less developed skeletal musculature—will interact with the sociocultural-linguistic system, with the mother as intermediary. Conscious and unconscious meanings will evolve and in turn interact with the outer environment. A dialectic of the development of female aggression, then, will progress as conflicts and contradictions are encountered, *in vivo*, during growth. Society, just like our theories, has reached only a temporary if any equilibrium in its concept of female aggressive potential. It remains for the psychologists of the future to provide a more definitive answer to whether woman is less or more aggressive than her male cohort, or whether the two sexes are equally aggressive.



# The Child Abuser

*Brandt F. Steele*



The various forms of child abuse and neglect resulting in temporary or permanent physical and psychological impairment can well be subsumed under the general title of violence. Abuse and neglect are somewhat loose terms applied to a broad spectrum of maltreatment of children who range in age from infancy to the attainment of adulthood, which is usually age 18 in most jurisdictions. If similar injuries were inflicted upon adults, the acts would most likely be classified as assault and battery. Child abuse must, therefore, be understood as categorized on the basis of the victim's age rather than primarily by the essential nature of the act itself. It is violence released upon a particular age group of people, infants and children, by another particular group of people, their caretakers. We say caretakers advisedly because, although biological parents may well be the most common abusers, the same violence can be released by stepparents,

grandparents, foster parents, adoptive parents, siblings, other relatives, paramours, babysitters, or anyone else involved in the caretaking role. Thus, child abusers may be men, women, or children, any of whom may or may not be related to the child.

There is some confusion about child abuse and child abusers because of the inescapable vagueness of the definitions of abuse and neglect as well as the enormous variability of the caretaker's actions and their effect on the child at different times. For example, a parent may, several times a day, hit or push a small child forcefully enough to knock him over without causing any physical signs of injury except an occasional slight bruise. One day, however, instead of falling on the rug-covered floor, the child falls so as to hit his head on the sharp edge of the coffee table; as a result, he suffers a skull fracture and brain injury and is taken to the hospital. Did the caretaker suddenly become an abuser on that day? Was the child not abused before? Is it only when damage to the child comes to public attention that abuse is a possible diagnosis? These and other questions are difficult ones, and we do not always have clear answers to them.

For purposes of the present discussion, the terms *abuse* and *neglect* are used to cover a wide range of nonaccidental injuries to children and a wide variety of failures to provide adequate care and protection of them. The effects of physical traumata are seen in the many forms of bruises, lacerations, abrasions, burns, fractures, and injuries to the brain and other internal organs. Neglect includes the failure to provide adequate nutrition, clothing, cleanliness, health care, and appropriate human emotional interaction and stimulation for normal psychic development. Such failures are due not to inescapable environmental factors but to the indifference, disregard, or avoidable ineptitude of the caretaker. The more severe forms of abuse and neglect are rather easily recognized and accepted as such after appropriate investigation. (For details of the manifestations of abuse and neglect, the reader is referred to the extensive descriptions in Fontana, 1964; Helfer and Kempe, 1972; and Young, 1964.) Milder degrees of maltreatment can be more difficult to document because of variable standards and customs of childrearing in different societies, communities, or subcultures. Often, if there is doubt or contention, the definition of abuse or neglect boils down to "what the judge says it is." The widespread distressing problem of sexual abuse of children is not included as such in this discussion; it is an issue of sufficient

complexity to warrant full consideration in a separate chapter. In many instances, however, sexual abuse coexists with physical abuse, and much of what follows in the discussion of physical abuse and neglect is equally applicable in situations of sexual maltreatment. It is our strong belief that most of the harm done to the child by sexual abuse is due to the unempathic disregard of the child's needs and stage of development and the aggressive misuse of the child for the pleasure of adults, rather than simply to the sexual nature of the act itself.

Although we cannot document abuse or neglect except as we see the various deleterious effects on the child, we cannot understand malfunctioning caretaking behaviors if we classify them only according to the kind, severity, or frequency of injuries to the child. It is not sufficiently illuminating to classify the parents according to how severely or how often they bruise, burn, whip, or fracture their infants. In order to comprehend what is happening, we are inevitably led to consider several other factors: the motivation of the caretakers; the specific meanings of the individual child and his behavior to the caretaker; the significance of the immediate interaction between the caretaker and child; and the total, general life situation of the caretaker, both past and present. Behaviors involving abuse and neglect do not exist as puzzling random phenomena, unconnected to the rest of existence. They become comprehensible when viewed as an integral part of the entire stream of life experience of the abuser, from earliest infancy on.

Many people still tend to think of child abusers as easily recognized behavioral deviants of socioeconomically disadvantaged groups. Such stereotypes are far from true. The occurrence of overt abuse obviously indicates a derailment or distortion of what are considered adequate, healthy childrearing practice. As such, it is indicative of some "abnormality" in the caretaker-child interaction—a maladaptive pattern of childrearing. Just as no two bankers, landscape painters, or baseball pitchers are exactly alike, no two abusers are exactly alike. Their only common feature is their maltreatment of children. In most other spheres, the lives of child abusers may not be significantly different from the lives of people who care for children without abusing them. Statistics about abuse of children and those who abuse them have often been derived in ways which, despite their accuracy, give biased implications. Studies done on big-city populations, for example, often conclude that abuse is essentially a phenomenon occurring in socioeconomically de-

prived minorities. In a different direction, our own work has been with people from a predominantly white population and includes many middle- and upper-class families as well as those from the lower class (Steele, 1970b; Steele and Pollock, 1968). Some studies show a preponderance of mothers as abusers, others show fathers in the majority, and some show no essential difference. The same is true in regard to the legitimacy or illegitimacy of the abused child. Some reports show a high incidence of abuse in crowded core-city areas and in "ghettos." Yet, in the 1976 *New York State Central Register on Child Abuse and Maltreatment*, one out-state county reports an incidence of abuse of children under 15 nearly triple the rate reported from New York City. Abusing caretakers tend to be young, possibly younger than nonabusers, but all infants and young children tend to have parents in younger age groups. Thus, demographic data have not always been as enlightening about the essential nature and origin of child abuse as one might wish. A recent excellent report (Gelles, 1977) on a carefully selected cross section of representative American families indicates that abuse is widespread throughout our society and that as many as one and a half million children between the ages of 3 and 17 were abused in a single year. This does not include the enormous number of maltreated infants under age 3, where abuse has its most serious consequences.

Abuse and neglect occur in all nations, in most subcultures, among both rich and poor, the highly educated and the illiterate, the working and the unemployed, the devout and the nonreligious, the alcoholics and the abstainers, the sane and the insane, ethnic minorities and majorities, and so on. This is not to say that deleterious social and economic factors are either irrelevant or without influence in situations of abuse and neglect. But they are also significant in the lives of nonabusers in all levels of society and thus cannot simplistically be considered delineators of abusers or as necessary and sufficient causes of abuse itself. The burdens of poverty, alcoholism, unemployment, and lack of education weigh heavily on anyone and can always enhance other problems and precipitate other crises, which may in turn contribute to abusive behavior in individuals who are already predisposed to it.

Because child abuse is often described in its most dramatic, violent extremes, there is a tendency to think of abuse as a manifestation of serious psychic disorder or mental illness—some sort of insanity or antisocial psychopathy. In our experi-

ence the incidence of psychosis in child abusers is about the same as that in the general population, and we know of no studies that give valid evidence to the contrary. The presence of a psychosis influences the occurrence and the style of abusive behavior, just as it has a profound effect on any other facet of the person's life. A child may be woven into the parent's delusional system and believed to be a dangerous tormentor or an evil being who must be attacked and punished. Under such circumstances serious abuse can occur. More common are schizophrenic and severely depressed caretakers, who become so withdrawn into their psychotic thinking that they seem unable to recognize the child as a real human being with needs—or even as someone who is there at all. The child is then seriously neglected, knocked around, or dropped, almost as if he or she were an inanimate object, and death can result from the repetition of such abuse. An uncommon and somewhat different phenomenon is the psychological exhortation and repeated physical attack used by certain religious groups to exorcise the evil spirits believed to possess a child. Such abuse—despite its righteous motivation, directed toward salvation—can result in death if the abuse is severe and recurrent and directed toward a small child.

Direct murder of young children without previous abuse is not common and is almost invariably the act of a seriously ill psychotic parent, relative, or family friend. Severe depression and schizophrenia with paranoid trends are the common types of mental abnormality seen. The pseudoaltruistic murder of children followed by the caretaker's suicide falls in this category. Caretakers who become acutely psychotic under the influence of hallucinogenic drugs may also injure or kill their infants, sometimes in such bizarre ways as using a broken bottle like a cookie cutter to core the heart out of a baby's chest. Fortunately, such events are quite rare. A more common form of abuse is perpetrated by caretakers who are under the influence of drugs or alcohol and, in a deleterious or delusional state, give their children LSD, barbiturates, hard drugs, or other dangerous substances in toxic amounts, or else neglect them severely. As any good parent knows, the care of infants and small children requires all the wits, attention, and energy that one can muster. Distorted thinking due to psychosis or toxic delirium inevitably leads to some degree of neglect of the child and often to physical abuse. It is not rare for men under the influence of alcohol to physically abuse both wife and children. Similarly, but less

commonly, an alcoholic woman can attack spouse and offspring. In like fashion, although for a very different cause, individuals with significant mental retardation may injure an infant in their care. They cannot always keep the needs of the child in the forefront of their thoughts, and they have not been able to learn the necessary techniques for minimal childcare. In more severe states of retardation, the caretaker may deal with the child almost as if it were a doll or an animal, resulting in severe neglect or injury. Such persons may do reasonably well with childcare if they have adequate backup and frequent supervision; without such help, however, they are unable to cope with the childrearing tasks.

Since child abuse is against the law, every child abuser is technically a lawbreaker and hence could be labeled antisocial or sociopathic, and a small percentage of abusers do have certain characteristics that fit into the rather vague category of sociopathy or psychopathic personality. They are often aggressively abusive toward people at large, as well as to their spouses and children; have frequent brushes with the law; have little sense of guilt or regard for the rights of others; and seem impervious to attempts to help them or provide counseling or treatment. Often they are "con artists" and cleverly manipulative—quite adept at trying to outwit the "system." Both male and female abusers can show these traits, but we believe, despite inadequate data, that the men far outnumber the women. The abuse inflicted by such "psychopathic" caretakers often tends to be sadistic or bordering on torture. The abuse is frequent, repetitive, and "routine," often occurring without apparent relationship to the child's behavior. (In contrast, most abusive behavior occurs in response to a specific situation or event.) This type of abuser inflicts pain by, for instance, extinguishing cigarettes on an infant's arms, legs, or face; thrashing a small boy daily to "make a man of him"; routinely sticking pins in a child during diapering; keeping an infant constantly tied in his crib with abrasive rope in order to keep him from wandering around the house; or beating children when in an alcoholic rage. With older children the sadistic caretaker may resort to emotional abuse, constantly ridiculing, belittling, disparaging, and vilifying the child. The origins of this kind of behavior are poorly understood. In some cases there are suggestions of subtle forms of organic brain damage with resultant abnormal behavior, but suspicions of such damage are not often confirmed.

The labels *sociopathy* and *psychopathy* are open to dif-

ferent definitions and interpretations, and hence lead to some differences of opinion and diagnosis. If inappropriate aggressive behavior and lawbreaking are sufficient criteria of sociopathy or psychopathy, then child abusers automatically fall into these categories, and many people consider such a diagnosis appropriate. We do not agree. We have known too many parents who have abused their babies but who have been, in other aspects of their lives, the epitome of rectitude. In a very simplistic way, sociopaths can be described as people who have no real sense of right and wrong and do not care what happens to other people. Most child abusers, however, have a firm sense of what is right and a conviction that their punitive acts are quite justified; and they may have a deep, although distorted, concern about what happens to others. Obviously, some abusers are psychopaths, and some psychopaths abuse children. In our opinion, however, it is neither useful nor correct to assume a causative or explanatory relationship—although some investigators believe otherwise. Smith, Hanson, and Noble (1975), for instance, reporting a controlled study of parents of battered children in Birmingham, England, found that 13.6 percent of the mothers and 37.1 percent of the fathers “had severe personality or psychopathic disorders,” and nearly half of the mothers were of borderline or subnormal intelligence; none of the controls were psychopathic. In another study Smith, Honigsberger, and Smith (1975) found that eight of thirty-five battering parents had abnormal electroencephalograms and were psychopathic, of low intelligence, and persistent batterers. We know of no other studies that indicate such a high percentage of electroencephalographic abnormality in child abusers or such a high proportion of “psychopaths.” We have seen abnormal EEGs only in child abusers who also happened to be afflicted with epilepsy or had a clear history of significant brain injury, although we did not routinely test all abusers by this method. In several instances where organic brain disease was thought possible, no abnormal records were obtained. Ounsted, Oppenheimer, and Lindsay (1975, p. 449) at the Park Hospital at Oxford found “serious mental illness, psychopathy, and inadequate personalities” among the abusing parents they studied, although less commonly than reported from the Birmingham study. They do not stress the significance of these diagnoses and feel that “statistical treatment of data is likely to mislead more than to clarify.” The origins of the various abnormal behaviors called sociopathic and psychopathic are poorly understood, and the voluminous psychiatric literature on

the subject has not yet provided a clear, consistent picture. A common element in the early life history of a majority of such people, especially those who become abusive, is a background of a chaotic household, characterized by hostile aggression and lack of care and affection. Because they themselves experienced abuse, neglect, and disregard rather than adequate growth-promoting parenting, they never learned to have full compassion for other humans and find it difficult to establish meaningful and reliable human relationships. In a few cases there is evidence of subtle forms of organic brain damage, which can logically be invoked as causes of abnormal aggressive behavior. In such persons, however, the organic brain damage itself may be the result of traumatic abuse in early childhood.

In the absence of good statistics, it is our impression that those who show the serious disturbances described above as psychosis or psychopathy constitute a small proportion of child abusers, probably not more than 10 percent. The great majority of abusers, the "typical ones," do not give evidence of such serious psychiatric disorders, although they may show the usual range of neuroses and personality problems encountered in the general population. The pattern of abnormal parenting expressed in abuse and neglect is widely distributed through a cross section of society; and, although it can coexist with a wide variety of psychiatric diagnostic categories and personality types, it cannot be linked to any particular one of them or necessarily considered a specific psychiatric disorder itself. To say that abuse is not a mental illness in the ordinary sense of the term does not preclude, however, the finding that a group of psychological factors are characteristically associated with child-rearing patterns involving maltreatment. We assume that parenting behaviors are largely reliable and repetitive responses to certain signals given by the infant. Such responses are not haphazard, simple impulses or "instinctive" reflexive reactions to signals and environmental pressures; instead, they are actions highly controlled by the individual psychological organization of the caretaker. Despite quantitative variations among its various components, we believe that there is a recognizable constellation of attitudes, beliefs, and emotional patterns commonly discoverable in those who abuse the children in their care, or have the potential to do so. We know of no single characteristic which by its presence or absence will clearly differentiate the abuser from the nonabuser. Rather, the several elements in the constellation—regardless of the variations in their individual



strength or prominence—interact with each other to produce the psychological set that makes the caretaker prone to become abusive or neglectful when under stress.

This constellation of psychological factors does not develop anew in adult life or only when a person is faced with the task of childcare. It has a long history and can be detected in various forms throughout the person's life. Awareness of its presence helps us understand not only the abusive behavior of parents but also that of other caretakers and that of younger adults and children long before they have actually become parents themselves. As mentioned, the early genesis of this pattern is suggested by the history commonly given by abusive caretakers; that is, they were themselves significantly neglected, with or without physical abuse, during their own earliest years. There is much evidence to indicate that one learns the basic ingredients of parenting behavior in the first two or three years of life, from the way he was cared for by his own parents. All parents tend to raise their children as they were raised themselves, and abusive parents are different from nonabusers, essentially, in the fact that they had a very poor experience of being parented; they then repeat this experience with their own offspring. We are referring here not so much to the mechanical aspects of parenting—such as occur in feeding, bathing, diapering, and so on—but rather to the much more subtle, empathic awareness of the child's needs and a sensitive, appropriate response to them. Such a parent is devoted to the infant and gives its needs priority over his own. People who were neglected or abused as children have a fairly characteristic set of memories and feelings about their childhood. They recall that their own desires, needs, and emotions were never really considered; that they were never listened to or considered valuable and important in their own right. On the contrary, they had to be acutely aware of parental expectations and strive to meet them; at the same time, they felt that their parents were never really pleased by anything they did. Consequently, they felt ineffectual and often worthless; they never had much sense of joy or pleasure in life or any reliable expectation that people would be good to them. They thought of success only in terms of avoidance of punishment, criticism, and ridicule. The effects of this kind of experience can be seen in later years in the form of low self-esteem; chronic, low-grade depression; a sense of hopelessness; and a lack of basic trust, with corresponding disbelief in the availability of help from other adults and a conviction that one

should try to solve problems alone rather than share them with others. There is a deep emptiness of unassuaged dependency needs and, at the same time, an inhibition of seeking satisfaction and pleasure.

Most abusers strongly believe that children really "belong" to parents, almost as a sort of property. This is not an attitude peculiar to abusers, except in degree. It is an exaggerated form of a belief that is pervasive in our culture and is firmly established within society in general and the law in particular. In legal tradition it goes back as far as the Roman Republic and the principle of *patria potestas*, which gave the father the right to expose, kill, sell, sacrifice, or otherwise dispose of his children (Radbill, 1968). At the present time, parental rights are not much curtailed until the child comes under partial control of the school system at age 5 or 6. The difficulty of interfering with parental "ownership" and control is seen in the problem of trying to obtain court orders to get medical care for a child whose parents oppose such care on religious grounds. Courts also have great reluctance to terminate parental rights over children, even in the face of serious and recurrent life-threatening maltreatment. To a great extent, the abuser sees the child as existing primarily to please the parent. Like all other parents, abusers love their children. The trouble lies in what they love them for. Whatever altruistic love they may have is counteracted by the sense of property, and the child is considered acceptable and valuable primarily as he satisfies the caretaker's demands and expectations.

As an inevitable corollary, the caretaker fails to see the child for what he really is, an immature human being with age-specific behaviors and limited capabilities. We consider this a lack of empathy—an inability to be sensitively aware of the child's states and respond correctly to them. The caretaker misperceives the child as if it were much older, and more capable of performing to please the caretaker, than it really is. This phenomenon is often described as role reversal; that is, the parent becomes the one whose needs must be catered to, while the child must assume the caretaking, satisfying role. In addition to this premature, excessive parental expectation of efficient, rewarding performance from the infant, there is often a corresponding misperception of the child's motivations. Thus, what looks like an average, normal infant to an outside observer is seen by the parent as an inefficient, stubborn, unrewarding child who is somehow maliciously continuing to cry or getting

sick "just to be mean." The child is mistakenly endowed with a cognitive ability and a deliberate wilfulness as exaggerated and inappropriate as his supposed performance skills. This combination of factors was expressed simply and clearly by an abusive mother who told us, "I have never felt really loved all my life. When the baby was born I thought he would love me, but when he cried all the time, it meant he didn't love me so I hit him." Kenny had been hospitalized at age 3 weeks with bilateral subdural hematomas (Steele, 1970a).

Another prominent feature of the abuser's style of child-rearing is a strong belief in the corrective and educational value of physical punishment. Those who abuse tend to implement punishment with more severity and much earlier in the infant's life than do nonabusers. This belief in punishment is not confined to abusers; it is common throughout society and has a long cultural history. As far back as 2800 B.C., the clay tablets from Sumer describe a characteristic feature of the schoolrooms of the period as "the man with the whip" (Kramer, 1956). Whipping, caning, and other physical punishments have continued to be rife in educational institutions from the academies of ancient Greece, through the schools of Rome, and on to the public and private schools of today's civilized countries. Similarly, all through history severe chastisement of children in the home has been supported and advocated by many moral and religious principles (Radbill, 1968). Opposite ideas have also been proposed since the time of Plato, who (in his *Republic*) suggested that teachers "train children, not by compulsion, but as if they were playing." But such efforts have always been overshadowed by the custom of punishment—even though studies have shown that strong physical punishment of small children fails to produce long-term change in the behaviors it is intended to correct (Sears, Maccoby, and Levin, 1957). Short-term conformity can be produced by punishment, but such conformity does not lead to habits of moral character in later life or outside the home (Kohlberg, 1964); and older children respond to physical punishment with increased aggression and destructiveness (Bybee, 1977).

The abuser is not merely responding to and repeating the cultural belief in punishment; he is repeating the pattern of disregard and punishment that he experienced and learned in the harsh environment of his own family, in his earliest years, long before he was exposed to the impact of extrafamilial society and culture. Thus, he is deeply influenced by the assimilation

into his own psychic structure of the punitive attitudes of the most basic authoritative figures of his life—his parents or other caretakers. He has used the mechanism of “identification with the aggressor” and has thereby laid the groundwork for the development of what is commonly called “the moral conscience” or “superego.” Henceforth, through the rest of his life, he tends under stress to regress to the earliest patterns and, if involved with childcare, will repeat with the infant the treatment he himself received.

This phenomenon of repetition is evident in the following brief vignettes: A 5-year-old boy, when asked why he had choked and shaken his “disobedient” baby sister, answered quite simply, “Mommy, that is what you used to do to me.” An 11-year-old boy who had been beaten and bruised by his father since infancy was left, against his wishes, to babysit a niece while the rest of the family went shopping and to the movies. When they returned, they found that the baby girl had been badly bruised because “she cried too much.” A late-teenage couple decided that their 16-month-old girl was “spoiled rotten” because they had followed the advice of a “crazy doctor,” who cautioned against spanking children; henceforth, they would treat the baby “as the two of them had been reared.” With the mother’s approval, the father began spanking the baby for misbehavior. A month later she was hospitalized with multiple bruises, brain hemorrhage, blindness, and paralysis of the left side. A 25-year-old father, temporarily unemployed and caring for his 3-month-old and 16-month-old boys while the mother was working, bruised and fractured the two boys during disciplinary punishment. He said that his own father had beaten him with boards to make sure he “grew up to be obedient, respectful, and not delinquent.” All these incidents clearly depict the transmission of abusive patterns from parent to child. We believe that this use of violence against very small children is not the result of cultural patterns alone. In order to become so deeply imbedded in the individual’s mind and unleashed so automatically against small children in later years, it must have been transmitted by the parents during the first three years of the individual’s life.

As a residue of their early years of emotional deprivation, child abusers generally are unable to seek and enjoy pleasure, both in general and in the sexual sphere. They do not really enjoy their own lives; their pleasure in children is skewed in the direction of their performance, and they do not allow the chil-

dren to have much pleasure. Very few things are done "for fun," either in or outside the home. Babysitters are not trustworthy and therefore are not used. Contacts with extended family members tend to be strained, in open conflict or very cold and distant. Friendships are few and often meaningless despite superficial cordiality. All these characteristics—coupled with a pervasive lack of basic trust in other humans—add up to a life of isolation, loneliness, and increased intensity of need for children and spouse to provide satisfaction and not be demanding. Inasmuch as abusers tend to find spouses who are like themselves, and just as empty, the marriage itself is not sufficiently rewarding, and the children become the final source of comfort. In such circumstances it is not surprising that misbehavior or incessant crying of a baby can precipitate a crisis, culminating in injurious punishment.

In addition to the presence of a specific psychological constellation, which is the *sine qua non* of abusive behavior, other factors tend to precipitate specific instances of abuse. The abusive caretaker, like all other people, has to cope with crises in life. If he is socially disadvantaged, in poverty, and poorly educated, the crises are likely to be more frequent and more severe, and he has fewer and less efficient techniques for coping with them. If he is well educated and well to do, crises tend to be fewer and more easily managed or resolved. Failure to resolve the crises of daily life can in turn precipitate tensions in the caretaker-child interaction system, and these tensions can result in abuse and neglect. Feeling isolated, fearful, misunderstood, unloved, deprived, angry, and hopeless, and unable to seek appropriate help from other adults or community resources, abusers turn to the only available source of satisfaction—the child. If the child, by obedient behavior or by signs of appreciation or loving response, gives the caretaker a sense of being approved, loved, or obeyed, the crisis may be, at least temporarily, calmed or averted. In the opposite direction, if the child disobeys, misbehaves, responds negatively to caretaker actions, or persists in crying with no remission, the caretaker feels one more unbearable putdown and disregard. It is then that accumulated anger can be released as abusive punishment or neglect of basic care. Crises alone, however, are not adequate explanations of abuse. Other elements besides the crises are necessary: a lack of empathy for other human beings, especially children, and a belief in the efficacy of physical punishment. Both of these elements are relics of the caretaker's own early

childhood. Under the regression induced by severe stress, they reappear to influence behavior.

The interaction between socioeconomic factors and individual psychology in the "causation" of child abuse is a complex one and calls for careful evaluation (Gelles, 1973; Parke and Collmer, 1975; Spinetta and Rigler, 1972). Our own bias is toward the deeper importance of the psychological set of the individual. Abusers seem to respond to stress in a characteristic way. When faced by great loneliness or a crisis such as financial trouble due to job loss, they are hampered or even totally blocked in trying to solve the problem through useful assertive action in the real world. Instead, they respond by feeling uncared for, misunderstood, put down, and fearful—in a repetition of the nightmare of their early years. There may be a lot of aggression mobilized, but it is more likely to be discharged on a "bad" child than in constructive actions. We do not believe, as do some sociologists (Gil, 1975), that the problems of abuse and neglect can be solved through elimination of poverty and poor housing and by improving education and job opportunities, desirable as these goals may be. The armed services are a case in point. Members of the services have a guaranteed annual wage well above the poverty level, adequate housing, access to adequate food and clothing, good health care for all family members, and often opportunities for education. Yet the incidence of child abuse is at least as high in the military as in civilian life, and its characteristics are the same (Miller, 1976; Wichlacz and others, 1975). The stresses in the service that seem potent in precipitating abuse are isolation; loss of contact with family; lack of close friends; feelings of being disregarded, uncared for, or even punished unfairly by superiors; and an inability to get anyone to listen to one's problems. Again, for the abuser these are the psychological traumata reminiscent of the days of early childhood. The early infantile needs are revived, no source of comfort is found in the adult world, and a child may bear the brunt of punishment for neglecting to fill the parental voids.

It is interesting to speculate on the relationship between child abuse and violence in general. Some abusers—those whom we have referred to as grouped under the diagnosis of sociopathy or psychopathic personality—tend to be overaggressive and also violent in many of their interpersonal relationships and general behavior. But they are a small minority. Most abusers, although they firmly believe in the value and use of physical

punishment, are not violent or unduly aggressive in their general lives. They discharge excessive aggression only within the confines of the family. Women, in fact, discharge their aggression almost exclusively in the area of child abuse, while men may additionally abuse the wife or paramour. Outside the family many abusers are frequently less than averagely aggressive. Their deep sense of worthlessness and insecurity and expectations of disapproval make it impossible for them to be even normally and healthily assertive. In quite the opposite direction, they often tend to be shy and meek and submissively put up with inconsiderate treatment without complaint. As a residue of daily events, they may well have smoldering, suppressed anger, which they can carry home and release later against their offspring. This occurs only if the child is expected to behave so as to make amends for the insults of the rest of the world and fails to do so. We know of no good evidence that abusers, as a group, have an abnormally strong aggressive drive. The problem lies in the pattern of aggressive discharge against the child, which the caretaker considers appropriate or rightfully necessary.

The child abuser is in the rather unique position of being a primary transmitter of violence in our culture. The abusive caretaker, repeating the pattern of his own upbringing, creates by his style of childrearing the next generation of abusive and neglecting parents. The child who lives in an unempathic, punitive environment absorbs these qualities into his own developing psyche, where they persist, only to surface in later years. But child abuse and neglect are not the only outcomes of such early unhappy experience. As we have discussed in detail elsewhere (Steele, 1970b, 1976), the great pool of abused and neglected children also provides the next generation of juvenile delinquents and probably a majority of murderers, as well as a number of assassins.

The family is in many ways the cradle of violence (Steinmetz and Straus, 1975). In the context of the early caretaker-infant interactions, the developing child absorbs his first lessons in how to disregard the rights of others and use aggression to solve problems. Through the idiosyncratic filter of parental authority, culturally accepted values are transmitted to the child long before he is exposed to the social environment and values of his neighborhood or subculture. The early experience of being neglected or abused provides the basic fertile soil for the growth of violent behaviors, which are then stimulated by television and other social elements encountered in later years.

Lack of empathy for other human beings is probably the most important element, since violence could not be released if there were real compassion for the victim as a person. Because of its origin in relation to the basic parental models of morality, abusive behavior often carries a tone of righteous justification. In this sense, it is not unlike other socially accepted or justified expressions of violence, such as capital punishment and war. The child abuser offers us a profoundly important example for the understanding and study of the violent behaviors so prevalent in our civilization.



# The Aggressive Sexual Offender

*Fritz A. Henn*



The adjectives in the title for this chapter contain the theme to be explored here in a consideration of sexual crimes: sexual versus aggressive impulses. Sex crimes included for these purposes are voyeurism, exhibitionism, child molestation, sodomy, and rape. These crimes, all of which involve aggressive and sexual impulses to some degree, can be divided into essentially sexual or essentially violent acts; and offenders who commit any one of these crimes are basically either sexual delinquents or violent aggressive individuals. This division has implications for treatment and may make some sense out of conflicting reports about the longitudinal history of sex offenders. From a variety of studies, a simple division between sexual crimes with some aggression and aggressive crimes with a sexual theme can be made. Voyeurism, exhibitionism, and, in a majority of cases, child molestation fall into the category of sexual crimes. Rape and

sodomy, on the other hand, are usually aggressive crimes with a sexual theme.

Voyeurism obviously is not aggressive, since the true voyeur does not wish detection or participation, only observation. It can be argued that any sexual act which interferes with the rights of others should be regarded as an aggressive act. However, even though the Peeping Tom and the exhibitionist interfere with the privacy of others, they generally do not use physical violence. Using the excellent study of exhibitionism by Mohr, Turner, and Jerry (1964), we can now draw a typical profile of an exhibitionist—a profile that points to the sexual and nonviolent nature of this offense. The offender is a male, approximately 28, with normal intelligence, married and with children, and without a history of other violent or criminal behavior. He is very likely to be a repeat offender, since exhibitionism has the highest rate of recidivism of any sexual crime. This individual, in general, has strong feelings of inadequacy and exhibits himself in a misguided effort to be assertive. If confronted by his victim, he will usually flee. At its core, exhibitionism is an offense of inadequacy rather than an offense of violence.

The problem of pedophilia, or child molestation, is more complex. This offense is not uniform but rather composed of a variety of offenses and offenders. There is a basic division between heterosexual and homosexual pedophiles. In addition, there is a subset of violent pedophiles whose acts generate enormous publicity. The evidence compiled by Mohr, Turner, and Jerry (1964), which remains the best review of this field, is substantiated by a study done at Cambridge (Radzinowicz, 1957) and by our own more recent work (Henn, Herjanic, and Vanderpearl, 1976). The profile of a child molester is predominantly one of a sexual rather than an aggressive offender. The offense is committed by a male of any age. The offender is of essentially normal intelligence and is unlikely to exhibit other criminal behaviors. The victim is usually known to the offender. Only seven of the sixty-eight cases studied by Mohr and his associates involved a child who was a total stranger to the offender. In our sample of pedophiles referred for psychiatric evaluation, we found mental retardation, organic brain syndromes, and schizophrenia among the offenders. However, compared to the incidence of these disorders in the general population, psychosis appears to be low in child molesters. The vast majority of child molesters are not suffering from major psychi-

atric illnesses. This crime stands at the border between predominantly violent and sexual offenses. The great majority of child molesters suffer from a specific sexual deviation and are not violent or aggressive individuals. Occasionally, however, this offense is committed by an extremely violent and aggressive individual, with tragic results. Usually the tendency toward violence is found among young offenders, rather than middle-aged or senescent pedophiles. The adolescents normally lack maturity, while the middle-aged have family problems and often a concurrent drinking problem. The elderly in general are lonely and isolated; few of them show actual signs of senility. In summary, then, child molesters are a heterogeneous group complicated by heterosexual mixed with homosexual patterns. In general, however, they are true sex offenders with no history of other criminal or violent behavior.

Of those offenses normally considered as significant crimes, only sodomy and rape consistently involve physical coercion and violence. Sodomy is so broadly and variously defined in different jurisdictions that the term has little meaning. That leaves rape as the only aggressive sexual offense which is well defined and involves violence. The study of rape and rapists has been sparse. The older literature, for the most part, dealt with psychological theories of motivation and involved few empirical studies. Within the last decade a number of studies have examined the characteristics of rapists in a controlled and systematic fashion. A compilation of these studies allows the formulation of a general profile of rapists. A comparison among studies also points to areas in need of further definition.

Even including the popular literature, only three widely read books on the topic of rape (Amir, 1971; Brownmiller, 1975; MacDonald, 1971) are to be found. In the earlier psychiatric literature, only a relatively small number of psychodynamically oriented studies of sexual offenders were devoted to rape. As Stürup (1968, pp. 9-10) has pointed out, "Those forms of sexual behavior which are considered the most deviant from a strictly psychiatric point of view [are] indecency toward children and exhibitionism. . . . It is important, however, to distinguish between what may be deviant from a psychiatric point of view and what is most serious in its social consequences; these are by no means identical." The older psychiatric studies were more concerned with offenses that were clearly manifestations of a lasting personality defect and as such were ripe for dynamic speculation. Pedophilia and exhibitionism, for exam-

ple, have exceptionally high rates of recidivism, and both of these deviant behavioral responses often continue through a major portion of the adult lives of the offenders. Therefore, they were of particular interest to psychiatrists. On the other hand, rape is a crime of violent young men and does not, except in rare instances, form a pattern of behavior which is repeated throughout adult life. Thus, it was not considered to be as interesting a psychiatric problem.

Before examining the offenders, let us examine the offense. The legal definition of rape involves the act of intercourse with a female against her will, with the stated exception of a man's wife in England and in the United States. This exception, as Brownmiller (1975) points out, no longer applies in Scandinavian countries and the countries of Eastern Europe. This difference provides a clue to the nature of rape. The exclusion of one's wife as a potential victim of rape is derived, in Anglo-American law, from the ancient notion of a wife as a possession. This concept, while no longer widely held, still forms the basis of current laws and suggests that rape, as a crime, has an element akin to a property offense. Rape can also be considered as a crime of violence or a crime of sexual lust. Rape as a pure crime of property does not occur frequently in our society, though rape in conjunction with burglary has an element of a property offense. Other cultures report more frequent occurrences of mixed sexual lust and property offenses. For example, a documented outbreak of rape among the Gusii tribes of Kenya in 1937 apparently occurred because the price of a bride rose beyond the means of the Gusii young men (LeVine, 1959). Rape during war is an example of a crime mainly of violence.

In the United States rape, as an offense, is increasing faster than other assaultive crimes. From 1969 to 1975 rape increased by 41 percent. To what extent this is a reflection of better reporting, the initiation of special rape squads in major cities, or a real increase in the number of offenses committed is hard to say; however, according to the National Center for the Prevention and Control of Rape, the increase is, at least in part, real. In St. Louis, where our studies were carried out, arrests for rape in the decade 1964-1973 increased steadily until 1970, when they actually decreased for three years. In St. Louis, as in the nation, the most common violent crime was assault, followed by robbery, rape, and homicide. To give an example of the relative frequency of these crimes, the number of arrests in St. Louis in 1973 for homicide were 201; for rape, 253; for rob-

bery, 1,179; and for assault, 1,442. One problem with figures such as these is that rape is the most underreported crime in police statistics. As an example, in 1967 interviewers at the National Opinion Research Center of the University of Chicago surveyed 10,000 households and established a rate of forcible rape over 3.5 times that reported in the U.S. Department of Justice's *Uniform Crime Reports* for 1967. Even despite the high rate for unreported rapes, the rate for reported rapes or rape attempts in the United States runs between forty and fifty per hundred thousand women. In contrast, rates in Northern Europe invariably are under ten per hundred thousand women. Since Northern European countries, on the whole, also have better reporting systems than the United States, the differences might be even larger between the two cultures. Similar low rates are found in the Mideast and Asia. This propensity for the commission of rape, as well as homicide, in the United States seems inexplicably high.

Rape is usually thought of as an individual crime. While this is generally the case, recent studies suggest that it is by no means an exclusive pattern. In six studies on this issue—involving rape in Philadelphia (Amir, 1971), Denver (MacDonald, 1971), Washington, D.C. (Hayman, 1971), Toronto (Mohr, 1965), Denmark (Svalastoga, 1962), and Finland (Antilla, 1968)—37 percent of the cases involved two or more rapists. Over one third of all rapes involved two or more men assaulting a single woman. This certainly creates a more terrifying situation for the victim and one in which the rapists are assured of dominance. Group rape was noted by Amir (1971) in his study of rape in Philadelphia. This study of 646 cases of rape was the first large-scale examination of rape and rapists. In it Amir examined the records of 1,292 offenders involved in these rapes and found that only 57 percent of these cases involved rape by a single assailant. In 105 cases the rape was the result of two men, while in 171 cases the rape was a group event. MacDonald (1971) found this same phenomenon in Denver—particularly in low-income, minority neighborhoods. He found that black and Spanish-American offenders were overrepresented among rape offenders in the Denver area, but they were even more overrepresented when group rape was considered; the offender rate for group rape was six times higher for blacks and fifteen times higher for Spanish-American than for the white offenders. For the most part, group offenses are committed against victims with the same ethnic and social background as the offender and

often evolve out of a gathering where drugs and/or alcohol is used. In general, a picture emerges of an offense committed by a group or gang who physically dominate and often end by degrading their victim. The act may be spontaneous, following a party situation in which alcohol and drugs are used, and it usually involves group pressure on reluctant members to maintain their group solidarity and participate in an act of violent machismo.

Understanding the nature of rape requires defining the role of individual deviance as compared to social pressure in the genesis of the offense. It also requires an examination of the sexual versus aggressive features of the crime. Perhaps the most likely avenue for understanding rape is to examine the perpetrator. Although rape has been neglected in both the psychiatric and the sociological literature, recently a number of large studies of rapists from a variety of urban centers have been reported (Amir, 1971; Henn, Herjanic, and Vanderpearl, 1976; MacDonald, 1971; McCaldon, 1967; Rada, 1975). In these studies sufficient demographic information was collected to describe the profile of rapists. The remarkably uniform picture that emerges is corroborated by the U.S. Department of Justice's *Uniform Crime Reports* (compiled by the Federal Bureau of Investigation). The age distribution of the rapist parallels the age distribution of other violent criminals. In most crimes young men dominate; in our study (Henn, Herjanic, and Vanderpearl, 1976) as in MacDonald's (1971), 75 percent of rape offenders were under 30; in Amir's study (1971) this figure was even higher, 82 percent. In marked contrast, the ages of child molesters (Henn, Herjanic, and Vanderpearl, 1976) and exhibitionists (Mohr, Turner, and Jerry, 1964) are distributed more evenly over the adult age range.

A racial breakdown of rapists consistently reveals an overrepresentation of minority groups. Amir found that 82 percent of the Philadelphia rapists were black; MacDonald found that 30 percent were black—at a time when the black population was under 7 percent in the Denver area; and 61 percent of the St. Louis offenders whom we studied were black. MacDonald also found that 34 percent of the Denver rapists were Spanish-American while this group constituted about 9 percent of the population. In the Amir and MacDonald studies, the victims of rape were predominantly of the same ethnic and socioeconomic background as the offenders. In our St. Louis study, rape also appeared to be predominantly intraracial. In the early 1960s

interracial rape made up only about 9 percent of all rape cases. Unfortunately, these figures are not available for the 1970s. Two studies, however, do analyze the racial breakdown of offenders and victims in rape cases in the 1970s. Brown (1974), in a study of Memphis police files, reports that black offenders and white victims constituted 16 percent of the cases; and Hayman (1971) found black on white rape steadily rising in Washington, D.C., and reaching 21 percent of all reported rapes during 1965-1971. This suggests an increasing trend for black-white rapes, which were found under 5 percent in the 1950s, about double that in the 1960s, and again doubled to over 20 percent of cases in the 1970s. The reverse situation, of a white rapist with a black victim, appears to be decreasing; 4 percent of rapes in the 1950s and 1960s in St. Louis and Philadelphia were white on black, and roughly .5 percent of the rapes in Memphis and Washington, D.C., were of this type. These comparisons are made from statistics in different cities and therefore are tentative at best.

The suggestion of an eightfold decrease of white on black rape concurrent with an eightfold increase in black on white rape does point to an area meriting further investigation. This change occurred in spite of widespread awareness of discriminatory penalties being given to the black offender who chooses a white victim. The explanation for these trends is difficult, but Hayman (1971) feels that the interracial crimes represent a combination of hostility toward women and a racial hostility. This is clearly the attitude Eldridge Cleaver reveals in his 1967 autobiography, *Soul on Ice*: "It delights me that I was defying and trampling upon the white man's law, upon his system of values, and that I was defiling his women." Even with these changing trends, it must be remembered that the vast majority of rapes are intraracial, and black on black crime still remains the dominant form of sexual assault. This racial discrepancy may simply reflect the socioeconomic distribution of rapists. For they, like most felons, come from the poorest socially disorganized urban areas. A correlation between race and socioeconomic distribution of rapists was found in the previously reported studies of Denver, Philadelphia, and St. Louis and in most European studies as well. Thus, although blacks are over-represented as offenders in all violent crimes on the basis of population, they may be proportionally represented with respect to the distribution of the population economically. There is admittedly a need for more data on this point, but the evi-

dence suggesting such an explanation was supported by the President's Commission on Law Enforcement and Administration of Justice when it examined the question in 1967.

A typical rapist is likely to be young and poor. He may or may not be married. (Given the youth of the offenders, many of them are married—approximately 40 percent in most studies.) He is also likely to have had previous arrests. One of the most revealing statistics concerning rape in the United States is the high occurrence of previous criminal records among rape offenders. Amir (1971) noted that a majority of his offenders had previous criminal records, and MacDonald reported that 85 percent of his imprisoned cohorts had a previous record. The staff report on crimes of violence to the National Commission on the Causes and Prevention of Violence (1969a) found that more than 70 percent of the rapists had previous records. In our study we compared the rates of violent criminal charges for rapists as opposed to other sexual offenders and found that rapists had nearly six times as many violent criminal charges as other sexual offenders. This tendency toward a history of violent offenses was also found in a Danish study (Svalastoga, 1962), where it was reported that 77 percent of the rapists had prior criminal records. These statistics strongly suggest that individuals involved in rape are predominantly anti-social, hostile, and violent—as opposed to having a specific, powerful, and uncontrolled sexual urge, as is suggested by some. Further support for this idea comes from Amir's finding that nearly three quarters of all rapes are planned and that between a quarter and a half of all rapes involve two or more men.

Of special concern in our investigation was the role of psychiatric illness, particularly psychosis, in rape. We therefore made a study of all rapists referred from the court for a psychiatric evaluation in the city of St. Louis. A previous study of felons imprisoned from the St. Louis courts had revealed an extremely low incidence of psychosis among imprisoned felons, suggesting that psychiatrically ill offenders were screened out prior to imprisonment (Guze, 1976). This finding suggested to us that the sixty-seven rapists sent for psychiatric evaluations would include most, if not all, of the seriously ill defendants charged with rape in St. Louis. Over a twenty-one-year period, we found ten offenders who might have been psychotic. Since complete police records and psychiatric histories were available in the St. Louis area for the period between 1961 and 1973, these years were used in our investigation of the rate of schizo-



phrenia and affective disorder among rapists. We found that eight of 2,657 rapists (.3 percent) had a diagnosis of schizophrenia or schizo-affective disorder, while no affective disorder, either depression or mania, was seen in any of the defendants charged with rape. This finding is consistent with MacDonald's impression that major psychiatric illness is rare in cases of rape and with the estimate of Gebhard, Gagnon, and Pomeroy (1965) that fewer than 1 percent of rapists have psychotic illnesses. These figures suggest that insanity (used in a legal sense) plays almost no role in rape. In contrast, nearly 70 percent of the rapists in our St. Louis study suffered from personality disorders; the vast majority (half of the total sample) had antisocial personalities. Similarly, in his study of convicted rapists in Canada, McCaldon (1967) found that half of his subjects had antisocial personalities.

Although objective studies are limited, alcohol use by the rapist also apparently plays a significant role in rape. Rada (1975) reviewed the role of alcohol in seventy-seven rapists involved in a special treatment program. He found that fully 35 percent were alcoholic and had been drinking heavily at the time of the crime. An additional 15 percent had been drinking prior to commission of their crimes. Rada's finding is consistent with the finding that alcohol is one of the principal factors in criminal recidivism (Guze, 1976) and that rape has a high rate of recidivism, over 35 percent in a California study (Frisbie and Dondis, 1965).

In summary, the profile of the rapist is similar to that of a felon involved in crimes against persons or property. He is a young, poor male; probably belongs to an ethnic minority; and is likely to have used alcohol or drugs just prior to his crime. He has a history of previous criminal activity and may well merit the diagnostic label of antisocial personality, but he is unlikely to suffer from a psychotic disorder. He is distinct from other sex offenders—especially pedophiliacs, exhibitionists, and voyeurs—primarily because of his violent tendencies.

When the average rapist is compared with other offenders charged with crimes against people, some useful comparisons emerge. The work of Lynn Curtis, as reported in the staff report to the National Commission on the Causes and Prevention of Violence (1969a), has shown that in statistical profile the rapist falls between the defendant for aggravated assault and the defendant for robbery. The "median" rapist falls between the "median" robber and the "median" assailant. The average rob-

ber is older and less violent, uses and abuses few chemicals, operates further from his home, and has fewer psychiatric problems than the average rapist. Conversely, the defendant charged with assault is younger and more violent, is more likely to abuse drugs and alcohol, operates closer to his home, and is more likely to have psychiatric problems than an average rapist. The rapist is less likely to know his victim than is someone involved in assault, but more likely than a robber. He also has a greater likelihood of being involved in interracial crime than someone charged with assault, but the opposite is true in cases of robbery. Rape as an act can be seen as comprising some of the same elements as assault and robbery. Assault is a crime directed solely against a person; it is a hostile, violent act aimed at causing physical damage and humiliation in the victim. Robbery is basically a crime against property; violence may be an accessory in this act, but the principal motivation is acquisition (to get something). Rape contains both of these elements, violence and physical domination, along with a desire "to have" the woman. Brownmiller (1975, p. 201) also espouses this idea when she suggests that the rapist sees his victim as "both a hated person and desired property. Hostility against her and possession of her may be simultaneous motivations. . . . In one violent crime, rape is an act against person and property."

Studies of the victim are far less complete than analyses of the offenders. However, several issues have been raised and deserve comment. These, in general, fall under the heading of *precipitants*. The general attitude toward rape varies from the feminist point of view (Brownmiller, 1975, p. 5) that rape is "a conscious process of intimidation by which *all men* keep *all women* in a state of fear" to the attitude of Wisconsin judge Archie Simonson, who, while giving a young rapist a sentence of one year at home under court supervision, suggested that the boy was only reacting "normally" to the sexually permissive environment of Madison, Wisconsin, in the spring of 1977. These divergent views suggest that attitudes toward the victims also differ widely, from total sympathy to disbelief and a feeling that "she asked for it." This disparity in viewpoint and the level of emotions involved point toward the need for objective investigations in the area. Two detailed studies of the victims of rape concluded that rape frequently (that is, in approximately half of the cases studied) occurs among acquaintances. The act of rape usually involves a victim with the same ethnic and socioeconomic background as the rapist. Single women predominate

among victims, and the women in general are young. For example, MacDonald (1971) found that 65 percent of the 200 rape victims studied in Denver were 24 or under. On the average, the victims were younger than the offender—although 7 percent of the victims in MacDonald's study were women over 50. The study by Amir (1971) revealed that nearly one fifth of the victims had an arrest record and that over half of these women had been previously charged with sexual offenses. This finding led to Amir's concept of "victim-precipitated rape"—that is, cases where the offender felt that a sexual invitation was issued but later retracted. These assaults often involved women with previous "bad reputations," alcohol use by both parties, and situations where the women had been picked up in a tavern or at a party. Again, little objective evidence has been collected on the question of alcohol or drug usage by the victim. More such studies are needed. Also needed are studies that examine the rapist's awareness of his victim's past history and criminal activity, as well as studies that examine the differences between women whose complaint of rape is unfounded, according to police, and victims who have a legitimate case.

Might the statistical examination of the "median" rapist conceal more than it reveals? Are there subgroups of rapists who have different backgrounds and act from varying motivations? As early as 1951, Guttmacher divided rapists into three categories: (1) the true sex offenders, who act in an explosive release of sexual frustration; (2) sadistic offenders, whose desire is to dominate and injure the victim; (3) aggressive criminals, in whom rape is a by-product of other criminal activity. Early studies of rape centered on the first and second categories. However, our study (Henn, Herjanic, and Vanderpearl, 1976), MacDonald's work (1971), and Amir's large study (1971) all indicate that the vast majority of rapists belong to the third category: aggressive, antisocial criminals. Although the role of sadism was also cited by Reinhart (1957), it is not common in the personality of rapists. The most detailed longitudinal study of aggressive sexual offenders was undertaken in Denmark, in conjunction with the use of castration in recidivistic cases. The role of sadism was felt to be minimal in these cases (Stürup, 1968). The mark of the majority of rapists is generally aggressive behavior, not localized sexual impulses. The earlier theories—which centered on the concept of the pure sex offender, who was driven by overwhelming sexual frustration—led to the concept of progressive sexual offenses; that is, the notion that there

might be a progression of sexual offenses, from voyeurism to exhibitionism on to rape. Rada (1975) did report such a progression in some of the subjects in his study, and MacDonald (1971) also found such a progression; other studies, however (Amir, 1971; Block and Geis, 1962; Henn, Herjanic, and Vanderpearl, 1976), found little evidence of progressive sexual offenses. This issue remains in doubt and deserves further study. Our feeling from studies of exhibitionists, pedophiliacs, and rapists is that in general these crimes are committed by different types of individuals and that progression through increasingly serious sexual offenses is the exception rather than the rule. In our view, the true sex offender may occasionally show such a progression, but the antisocial offender will not be limited to sexual offenses and will be minimally involved in lesser sex crimes. This is an area where detailed retrospective histories might provide a clear answer.

Let us look now at some of the social forces that may influence the number of rapes committed. War, for instance, stands out because of the widespread belief that it stimulates a high rate of rape. During ground warfare there are innumerable stories of rape, gruesome if carried out by the enemy and minimized if done by an ally. Rape is a crime under the American Uniform Code of Criminal Justice. However, its enforcement during ground war operations is doubtful. If the incidence of rape is as elevated in reality as anecdotal discussions suggest, then we may find some clues to etiology. That is, under circumstances where normal prohibitions against violent behavior are removed, and where acts of homicide and assault are sanctioned, perhaps rape increases as well. Evidence is difficult to obtain, and army statistics indicate that only about eleven charges for rape were filed per year in Vietnam during the period 1965-1973 (Brownmiller, 1975). This figure is at such variance with the reports filed concerning troop behavior that it appears meaningless. When the victim is—for ethnic reasons, if for no other—"the enemy" and has no ability to communicate with the invading army, the reporting of rape is at best doubtful. Historically, and without significant exceptions, ground wars involving an invading army have involved tales of raping, looting, and wanton violence. If we take this consistency as indicative of the true state of affairs, what does it suggest about rape? It seems to suggest that violent aggressive behavior is in part under social controls. The question is not whether an individual has the capacity for assault or rape but, rather, whether he has suffi-

cient social controls to prevent such actions. This idea was suggested over twenty-five years ago by Jenkins (1951), who felt that the development of social inhibitions is central in controlling sexually assaultive behavior. Such controls, in his view, require two important elements: the early development of an affectionate relationship, which develops the capacity to feel for others; and the use of social pressure, from which behavioral standards emerge. Following Jenkins' analysis, wartime is an example of radically altered social standards, and at times social forces actively encourage acts such as rape. This duality of forces can also explain the profile of rapists seen in cases of rape in ordered suburban settings. Here the individuals are found to be almost entirely antisocial personalities who clearly have not developed any concern for others and do not respond to normal social pressure. Attempts to treat these offenders have not been very successful (see Levine and Bornstein, 1972).

Looking at rape as a crime involving assault and sex requires that we account for the sexual as well as the assaultive aspects. Although violence or aggression is the dominant factor in most rapes, there are exceptions. Certain individuals, for instance (those in Guttmacher's category of true sex offenders), have repetitive overwhelming sexual urges, and their other behavior lacks antisocial characteristics. These individuals usually have a history of other sexual crimes, such as voyeurism or exhibitionism, and are exclusively involved in sexual crimes. It is for these individuals that most "sexual psychopath" laws were written. However, since there has been no widely available treatment, these laws appear to be useless for rehabilitation and often result in confinement, with little regard for the civil liberties of the defendant. There have been some structured efforts to work with these individuals, the most notable in Herstedvester in Denmark. This program, based on a situational approach to interpersonal relations, also uses such medical approaches as hormone therapy and castration where appropriate. Before castration is even considered, the offender must feel that he is likely to commit another sexual offense, and he must agree to castration. This treatment is most often used in cases of repeated child molestation, but also with the occasional rapist. It is not used in cases of psychosis generally; where it has been tried, the results have been poor. Castration as an elective procedure produces remarkably good results, according to the Danish study, in reducing anxiety, returning men to productive activity, and decreasing sexual drive. Some men are able to con-

tinue sexual relationships in a limited way. This route seems to offer real advantages to the individual who suffers acutely from an increased sexual drive which causes him repeated difficulties.

Castration as a therapeutic tool to help sex offenders is virtually unknown in the United States. Outside of militant women's organizations, the concept of castrating rapists is considered inhuman and beyond discussion. In addition to its use in Denmark, this treatment has been used in other European countries for over forty years, and because of its drastic nature excellent follow-up records have been maintained. Castration has proven itself as an effective treatment. A review of cases from Sweden, Germany, Switzerland, Norway, and Holland reveals that, out of 3,186 cases of castration, only 69 were charged with a subsequent sexual assault—a 2.2 percent recidivism rate (Stürup, 1968). In contrast, a recidivism rate of over 35 percent for aggressive sexual crimes was reported in a California study (Frisbie and Dondis, 1965).

The sexual element of rape is not overriding when prison rape is considered. The incidence of actual prison rape undoubtedly varies from federal prison through state institutions on to local jails. It is substantial and involves men of heterosexual orientation in what is principally the establishment of dominance and secondarily a sexual release. The French writer Jean Genêt has presented an intellectualized view of homosexual rape in prison; namely, that victimization is rewarding and that, in a sense, sainthood is approached through sexual humiliation (see *Our Lady of the Flowers*). However, even given Genêt's homosexual machismo, it appears clear that his position in prison was determined by his sexual activity and that his youth and weakness defined his place more than any defensive rationalizations. Rape as an act against women is a theme in *Against Our Will* (Brownmiller, 1975); and in most instances rape is an act of domination that has women as its object. In some cultures, however, women sexually molest men, in acts that are clearly hostile, physically violent, and aimed at domination (see, for example, Malinowski, 1929). Such behavior again points to utilization of a sexual outlet for aggressive attack. The current that runs through all forms of rape—in urban heterosexual settings, in war situations, or among homosexuals in prison—remains the violent aggressive impulse channeled in a sexual direction.

Why the sexual outlet for aggression? Looking to biology we find that aggression is universally present throughout the

phyla and generally involves either sexual competition or resource competition. The common forms of aggression are territorial disputes, disputes to establish dominance, sexual aggression for mating, and predatory aggression. Throughout, the common theme of genetic propagation is central to understanding these behavioral patterns. The rewards of large territories and dominance generally are sexual; the most successful members of a species therefore propagate most frequently and spread their genetic material onto a disproportionate number of the species. The evolutionary consequences are obvious and desirable. These patterns also demonstrate where the strong tie between sexual activity and aggression originates. For aggression, controlled often through ritual, is the vehicle for maximizing individual gene propagation. Consequently, aggressive impulses are closely tied to sexual impulses, and in primates as in lower animals aggression is clearly maximal during the breeding season (Wilson and Boelkins, 1970). The term violent *machismo*, which we used to describe the group rapes, is exactly the term Wilson (1975) uses to describe sexual competition in such diverse species as sheep, deer, grouse, and elephant seals. It is this evolutionary pattern, which we control via socialization or civilization, that reemerges in human rape when the process of social control breaks down.

This overview of sexual offenders suggests that aggressive offenses differ qualitatively from other sexual crimes. Sexual deviance which takes the form of voyeurism, exhibitionism, or child molestation appears to be related principally to strong misdirected sexual impulses. Rape, the model of an aggressive sexual offense, appears to be a fundamentally aggressive crime whose focus becomes sexual. The forces acting to define behavior such as rape or aggression may be hypothesized to have two principal elements. The first is an individual internal element, which, regardless of etiology, operates to define individual standards and is clearly deficient in cases of antisocial behavior. The second is external and a result of the degree of social order and social influences on behavior. This general hypothesis of both internal and external controls on aggressive behavior provides a framework in which to ask certain questions about rape and rapists. The increase in rape and in interracial rape appears to be real, and it would be useful to examine the demographic variables associated with this increase. Does it reflect the problems of social decay and economic need so evident in urban centers? If so, should not the increase in rape be con-

fined to center-city areas and be absent in rural areas which have remained stable? Also, one could argue that group rape is a feature of the breakdown of social controls and again should be seen primarily in center-city areas, and should be increasing at the same rate as total rape in these areas. One could also suggest that the true sex offender, who is not a generally antisocial delinquent, might show a progression from minor sex offenses through to rape, whereas other rapists would not be expected to show such a progression. These are all testable hypotheses and may help to define those variables which control the incidence of rape. In addition, the role of the victims could be assessed: whether they had used alcohol or drugs prior to the incident, whether they had a history of criminal problems, and whether they knew their attackers. Through investigations such as these, based on empirical data, it might be possible to understand and control the factors responsible for the increase of aggressive sexual offenses in this country.



# Substance- Induced Aggression

*Robert J. Powers*  
*Irwin L. Kutash*



The belligerent drunk, the mugger desperate for heroin, the frenzied speed freak indiscriminately striking out at those about him: are there bases to such stereotypes of the dangers of substance abuse? The aim of this chapter is to evaluate the relationship of aggression and violence to substance abuse. Particular attention will be given to drugs commonly associated with aggression and violence: alcohol, amphetamines, heroin, and LSD.

Drugs may be used for many reasons. Often-cited motives are relief from anxiety and depression, curiosity, amusement, conformity to peer pressures, and rebellion against parental or societal norms. When drugs are taken, several factors determine the extent and nature of aggression expressed. The most salient of the factors are drug type, premorbid personality, dosage, expectations ("set"), and environment ("setting"). Other factors, such as gender and rate of metabolism, may be influential, but

usually their influence is minor in comparison to the factors just mentioned.

Experimental evidence of the interactive effects of drug type, premorbid personality, dosage, set, and setting is fragmented and difficult to interpret. In order to examine these interactive effects experimentally, one would have to vary each factor, one at a time, while holding the other factors constant. Such a comprehensive experimental investigation has not yet been accomplished. At present, the most adequate evidence of the interactive effects of the five factors is often obtained from clinical observations. Naturalistic and laboratory experiments may augment clinical observations, but they cannot replace them.

Drug types or classes are commonly distinguished in terms of pharmacological properties and therapeutic effects. Hoffman (1975) differentiates four primary classes of drugs: depressants, stimulants, narcotics, and hallucinogens. Depressants, which are therapeutically used mainly for their calming effects, consist of sedatives (such as Seconal or Nembutal), tranquilizers (such as Librium or Valium), anesthetics (such as ether or chloroform), and alcohol (which has no recognized therapeutic use). Stimulants—such as amphetamines, Tofranil, and Parnate—are used chiefly as antidepressants, although amphetamines have been used to reduce appetite and, paradoxically, to calm hyperactive children. Narcotics—such as opium, heroin, morphine, and codeine—may be used in the relief of pain. Hallucinogens—which include marijuana, LSD, and mescaline—have been used in psychotherapy, but with mixed results.

Premorbid personality has a vital effect on the relationship between violence and substance abuse. An individual in harmony with himself and his environment is less likely to seek drug effects. With inadequacies in ego functioning, an effort to alter internal experience becomes more likely. Also, however, with increasing impairments in ego functioning, there often are increased difficulties in integrating the psychoactive effects of drugs and in regulating aggressive drives. Hence, inadequacies in premorbid personality may well lead simultaneously to greater utilization of drugs and to greater potentiality for violence once substances are abused. Some premorbid personality types clearly associated with violence and substance abuse include inadequate personalities, antisocial personalities, passive-aggressive personalities, and explosive personalities. Psychotics, such as paranoid schizophrenics, and depressed individuals with poten-

tialities to turn aggression inward also can be included in this group.

Drug dosage is an important factor, in that markedly different psychoactive effects may well occur with dosage variations from low to high levels. Closely related to drug dosage are frequency and methods of use. Frequent or chronic use of a drug may cause a cumulative effect, serving to intensify psychoactive experiences. Similarly, methods of use which facilitate the drug's entrance into the bloodstream, as in subcutaneous and intravenous injections of narcotics, also tend to heighten psychoactive effects.

Mental set regarding a drug entails an individual's prior experience with the drug and his apprehensions, if any, about its use. An understanding of likely drug effects and a nonapprehensive attitude toward them may well reduce the likelihood of negative reactions, such as aggression. This is especially true for hallucinogens and amphetamines.

The physical, cultural, and interpersonal environments during drug use may contain elements that contribute to aggression. The physical environment may include deprivations leading to discomfort and frustration, which can in turn—especially during drug use—lead to anger and aggression. The cultural environment may include a propensity toward violence in certain antisocial subcultures, including certain drug-using subcultures. The interpersonal environment may lack good object relations, leaving an individual without the stabilizing influence of concerned others during his drug experience.

Drugs in each of Hoffman's (1975) four classes may be directly related to the occurrence of aggression or violence. A review will now be provided of one drug from each class—alcohol, amphetamines, heroin, and LSD—with particular attention given to factors that moderate the expression of aggression and violence: premorbid personality, dosage, set, and setting. One caution, however: Although, for the sake of clarity, we evaluate each drug under the heading of these separate variables, in clinical occurrence these variables interact in almost all cases, so that aggressive or violent behavior is most often multidetermined.

### Alcohol

Alcohol has been considered responsible for more aggression and violence than any other drug (Goldstein, 1975). The use of alcohol dates at least from the Babylonian period and has

been found in a majority of cultures throughout the world. In the United States the use of alcohol has been prominent since the earliest colonial settlements; and, as Benjamin Rush observed in 1786, it was frequently related to aggressive and violent behavior (Paredes, 1976). Among symptoms associated with inebriation, Rush listed captiousness and a disposition to quarrel, profane swearing and cursing, fighting, and certain actions indicating a temporary fit of madness—for instance, tearing one's clothes, breaking glasses and china, and dashing other articles of household furniture upon the ground or floor (Paredes, 1976). Recently several surveys have indicated a strong relation between alcohol use and both assaultive and nonassaultive crimes. Wolfgang (1958), for instance, examined Philadelphia police records of 588 homicides and found that alcohol had been present in 54 percent of the offenders and in 53 percent of the victims. Voss and Hepburn (1968) analyzed Chicago police records of 395 homicides and noted that alcohol was evidenced in 53 percent of the cases. Nicol and his colleagues (1973) found that men appearing before courts, as well as men in prisons, often have a history of heavy alcohol use.

*Premorbid Personality.* Individuals with aggressive and sociopathic tendencies are particularly prone to extreme aggression or violence when under the influence of alcohol. Mayfield (1976) evaluated the drinking behavior of 307 persons convicted of serious assaultive crimes. Problem drinkers more often had a previous criminal record (exclusive of alcohol offenses) than nonproblem drinkers and also more often had committed previous assaults. The great majority of the problem drinkers (80 percent) had been inebriated during the assaults for which they were presently imprisoned, and Mayfield concluded that the assaults probably would not have occurred in the absence of alcohol use. Hanks and Rosenbaum (1977) investigated the interpersonal relationships of twenty-two alcohol-abusing men and the "battered" (physically abused) women with whom they had been living. They found that the men usually had had a propensity to violence before establishing relationships with the women. In the relationships, the men frequently had experienced intense feelings of rejection and inadequacy, had begun drinking, and had then become assaultive. Nicol and associates (1973) studied the degree of violence and the drinking habits of ninety men who had been given long-term prison sentences. The most seriously violent of the individuals tended strongly to have serious drinking problems, often amounting to physical depen-

dence. Because of severe difficulties in interpersonal relationships, the violent individuals had often been in lonely and distressing situations. The investigators concluded that, for these offenders, drinking was a common response to stress and that violence may well have occurred as a result of the pharmacological effects of alcohol taken under the distressing conditions. It should be noted that increased aggression also may appear in persons with no manifestations of personality disturbance. With "normal" individuals, factors such as dosage, set, and setting are most critical.

Paradoxically, individuals with passive and rigid moralistic tendencies may show increased aggression or violence under the influence of alcohol. Tamerin and Mendelson (1969) and McNamee, Mello, and Mendelson (1968) conducted laboratory studies in which chronic alcohol abusers were allowed full access to alcohol for extended periods. The subjects were observed to be very passive, as well as uncomplaining and anxious to please, during predrinking phases of the studies. Under the influence of alcohol, the subjects became demanding and aggressive. There were frequent complaints regarding the experimental situation, and—especially in the Tamerin and Mendelson study—there was much hostile, "hypermasculine" behavior. Roebuck and Johnson (1962) compared two groups of males: (1) 40 males charged with drunkenness and assault and (2) 360 males charged with a large number of other offenses. An evaluation of thirty-four sociopsychological characteristics showed that the former group had grown up in far more rigid and ethically strict environments than the latter group. Both groups experienced the same general social frustrations, and it was hypothesized that the former group could manifest hostility only after alcohol had weakened inhibitions, at which time explosive outbursts of violence often would occur. In our own clinical practices, we have treated several passive individuals, with rigid self-controls, who had become extremely hostile and aggressive when drinking. These individuals had many similarities to persons described by Megargee (1966) as overcontrolled aggressors. The individuals tended to cumulate or "build up" resentments over lengthy periods and then, when drinking, would "explode" in rash and violent actions. In one instance, a man had passively accepted the infidelities of his wife for several months and then, after a rare drinking spree, assaulted both his wife and her boyfriend and nearly killed them.

The interactions of premorbid personality, alcohol, and

aggression are highly complex—and paradoxical. Aggressive individuals can become more aggressive; yet passive individuals can also become aggressive; and, additionally, aggressive individuals at times may become more passive. In the last instance, when the aggressive individual becomes more passive with alcohol use, the relaxing and euphoric effects of the drug may help the person to overlook frustrations and negative feelings, such as rejection and inadequacy. Some of our own clients with problems of high aggressiveness have told us that alcohol helps them control hostile or violent feelings—for instance, when they are extremely angry at another person or at some frustrating occurrence. Similarly, Menninger, Mayman, and Pruyser (1963), in their descriptions of five levels of personality dyscontrol, note that some highly aggressive individuals commonly use alcohol in order to maintain control over threatening aggressive impulses. Unfortunately, the calming influence of alcohol is quite tenuous. Frustrating or challenging occurrences may readily result in intense outbursts of aggression or violence.

In highly aggressive individuals, as well as in other persons, alcohol may induce cognitive changes that increase the probability of extreme aggression or violence. With the consumption of alcohol, there is typically a decrease in conceptual and abstracting abilities; hence, there is a greater likelihood of misinterpretation of other persons' remarks or actions (Pernanen, 1976). In addition, there tends to be a distortion in time perspective, with enhanced focus on the present and diminished ability to predict alternatives in the future (Tinklenberg, 1973). As Pernanen (1976) suggests, with alcohol use there is a greater probability that misinterpreted remarks or actions will elicit aggressive responses and that there will be a diminished capacity either to reinterpret the remarks or actions or to enlist appropriate means of coping with them. Whereas in a sober state an individual may quickly realize that another person was joking or did not mean what he said or did, in an intoxicated state he is less likely to achieve that realization. Consequently, when two or more persons are drinking together, there is a far greater chance that misunderstandings or disagreements will rapidly escalate in a series of accusations and counteraccusations, eventually resulting in extreme aggression or violence. Just such occurrences are suggested by Mayfield (1976, p. 290):

In our population, we found, in abundance,  
individuals who commit assaults when intoxi-

cated. . . . We also find that the victims of the assaults are commonly drinking and the assaults commonly occur in a drinking situation. The assaults are typically sudden, impulsive acts—too frivolous of motivation to be convincingly labeled “crimes of passion.” They are often a result of action and reaction between acquaintances who often do not have longstanding or deep grievances, but rather a mutual state of intoxication and a readily available quick and lethal weapon.

The disinhibiting effects of alcohol may account for the drug’s paradoxical effects in increasing aggression in passive individuals and, at times, decreasing aggression in aggressive individuals. By “releasing” or disrupting inhibitory controls, alcohol facilitates the expression of suppressed impulses. If aggressive impulses are suppressed, alcohol enhances the expression of those impulses. Hence, passive and inhibited individuals may well become more assertive or aggressive when drinking. If aggressive impulses dominate, however, alcohol may result in a “release” of previously suppressed passive aspects of the personality. The suppression of passive elements of personality has been particularly common in our society, which has tended to accentuate assertive or “macho” aspects.

Premorbid personality appears to play a role in a relatively rare condition, “pathological intoxication,” in which sudden outbursts of violent behavior occur just after the start of alcohol consumption or long after its end. The disorder has been compared to epilepsy, and it is likely that physiological factors play a vital, if not dominant, etiological role (Noyes and Kolb, 1968). Bach-y-Rita, Lion, and Ervin (1970), however, observed ten patients manifesting symptoms of pathological intoxication and concluded that a high degree of anxiety is necessary to engender a violent outburst. The patients drank on many occasions with no negative effects, but sudden violent outbursts often occurred on occasions where there was an unusual degree of stress and resultant anxiety. Very probably, then, pathological intoxication results from a synergy of premorbid physiological and personality factors. Other premorbid personality disorders (such as latent schizophrenia, mental incompetency, and head injuries) have been identified as increasing the probability of aggression or violence under drinking conditions. However, in persons with these disorders, the possible relation of alcohol to

increased aggression has not yet been substantiated by empirical research (Pernanen, 1976).

*Dosage.* The relationship of alcohol dosage levels to aggression and violence is curvilinear. When dosage levels are medium (blood alcohol content .10 percent to .29 percent), there is a greater likelihood of aggression or violence than under either low levels (.01 percent to .09 percent) or high levels (.30 percent or more). Shupe (1954) provides evidence of the effects of dosage level in an analysis of the blood alcohol content (BAC) of 882 persons apprehended either during or immediately after a felony. Shupe determined that far greater percentages of robberies (44 percent), assaults (58 percent), and murders (53 percent) occurred under medium dosage levels than under either low or high levels. Only 12 percent of the robberies, 13 percent of the assaults, and 17 percent of the murders occurred at low dosage levels; and 12 percent of the robberies, 20 percent of the assaults, and 13 percent of the murders occurred at high dosage levels. At very high dosage levels, as Shupe documented, physical reactions are so slowed and consciousness is so dulled that there is a general inability to carry out assaultive actions. Additional data on the effects of alcohol dosages are provided by Taylor and Gammon (1975). In a laboratory study they evaluated aggression in terms of shocks given by subjects during competitive tasks. Subjects given low dosages of bourbon or vodka (.5 ounce per 40 pounds of body weight) showed less aggression (lower shock levels) than subjects given no alcohol. However, subjects given medium dosages (1.5 ounces per 40 pounds of body weight) showed greater aggressiveness than subjects in the nonalcohol conditions. From the results, Taylor and Gammon concluded that small doses of alcohol may produce a tranquil affective state that is incompatible with aggressive responses, while medium doses produce an excitable affective state that is compatible with aggression.

With chronic use of alcohol, the likelihood of aggression or violence may be increased when alcoholic hallucinosis or alcoholic paranoia occurs or when the individual is suffering from alcohol withdrawal symptoms, especially delirium tremens. In alcoholic hallucinosis both visual and auditory hallucinations may occur; although they may at times be pleasant in appearance, at other times they may be grotesque and threatening. Alcoholic paranoia is characterized by delusions of persecution, which often have a base in feelings of jealousy or in latent homosexual desires. Typical of delirium tremens are extreme



tremulousness and agitation, along with hallucinations and poorly systemized delusions, frequently of a threatening nature. Aggression and violence are relatively infrequent in these syndromes but may occur in panic reactions or in assaults which occur as reactions to imagined dangers.

Finally, a major effect of alcohol is upon the nervous system and, most significantly, the brain. It is well established that the nerve cells most affected are in the cortex and particularly the frontal lobe (Brewer and Perrett, 1971; Feuerlein and Heyse, 1970; Haug, 1968). While it is not precisely determined which areas of the brain control which types of behavior, these areas are often considered to be involved with judgment and self-control, which affect conduct. Hence, some violent crimes could result from brain damage produced by the chronic frequent use of alcohol. We have, in fact, treated severely brain-damaged alcoholics who had committed aggressive acts stemming from confusion and misinterpretation of nonthreatening circumstances. In such cases the organic factor often interacts with premorbid personality as well, to produce violence, and it is often difficult to differentiate the extent of the effect of each factor.

*Set.* Expectations or stereotypes of alcohol-induced behavior may well lead to aggression. Stereotypes, such as the barroom drunk "taking on anyone in the house," may be inculcated and serve as learned cues (Kaplan, 1971). Such cues may well influence the social role considered appropriate in drinking settings and result in behavior that would be considered inappropriate in other settings (Bennett, Buss, and Carpenter, 1969). Additionally, social stereotypes may provide an individual with an excuse for aggression while drinking, since he can blame his actions on the effects of the alcohol (Goldstein, 1975).

An experimental study illustrating the effects of expectancy was conducted by Lang and associates and reported by Nathan and Lisman (1976). Subjects were given a beverage to drink; half were told that it was alcohol, and the other half were told that it was tonic water. Half of the subjects in each group were actually given alcohol, and the other half were given tonic water. Then, in half of these four a confederate provoked aggression; in the other half, a confederate maintained a neutral interaction. The results showed that subjects who thought that they had been given alcohol, but were given tonic water, were more aggressive than those who thought that they had been given tonic water.

*Setting.* Drinking, as a well-accepted social practice, brings people together into close social interactions—for instance, at bars and cocktail parties. The mere presence of many other persons in close contact enhances the likelihood of aggression, independent of any contribution from alcohol (Bennett, Buss, and Carpenter, 1969). The use of alcohol, however, does add to the likelihood of aggression and violence. In a study of 116 cases of criminal homicide, Virkkunen (1974) found that in 92 cases (79 percent) alcohol was detected in either the murderer or the murder victim. Surprisingly, aggressive behaviors and altercations that had preceded the crimes had been initiated by the victims as frequently as by the offender. Situations where two males were involved were most frequent, while situations involving a male and a female or two females were less common.

In laboratory studies the circumstances under which alcohol was used have had considerable effects on the expression of aggression. Increased aggressiveness from alcohol use was found in experimental settings that simulated social situations, such as cocktail parties (Boyatzis, 1974; Kalin, McClelland, and Kahn, 1965; Takala, Pihkanen, and Markanen, 1957), but was not found in a study that did not simulate common social interactions (Bennett, Buss, and Carpenter, 1969). Increased aggression from alcohol consumption also was found in studies where aggression was provoked by competitive tasks (Shuntich and Taylor, 1972; Taylor and Gammon, 1975) but was not found in the study just mentioned (Bennett, Buss, and Carpenter, 1969), where there was no subject competition. Aggression, therefore, appears to increase when alcohol is used in social and competitive situations. Replications of the research on social interactions and competition are needed, along with investigations of other circumstances under which increased aggression may occur with the use of alcohol.

*Summary.* Aggression or violence is most likely to occur during alcohol use if (1) premorbid personality is characterized by aggressive and sociopathic tendencies; (2) dosages are at medium levels (blood alcohol content of .10 percent to .35 percent); (3) stereotypes of alcohol-induced behavior serve as cues for aggression or are used to excuse the individual from responsibility for his aggression; and (4) drinking occurs during close interpersonal interactions with others, particularly in social and/or competitive situations.

### Amphetamines

Amphetamines were first marketed in the early 1930s as decongestants and soon were used to counteract fatigue and depression and to increase mental alertness. For nearly two decades there was little public concern about possible negative effects of amphetamines. In the early 1950s Japan placed large quantities of its World War II stocks of amphetamines on the open market, and widespread misuse followed. Numerous incidents of crime and violence associated with high dosage and intravenous usage were reported, and amphetamine-control laws were then enacted (Wikler, 1976).

In the United States intravenous use of amphetamines probably was introduced by servicemen returning from Korea (Brecher and others, 1972). In the 1960s the practice of high-dosage intravenous usage grew rapidly, and there were numerous incidents of heightened excitability leading to aggressiveness or violence. There were also frequent episodes of toxic paranoid psychosis, in which individuals reacted forcefully against persons who were imagined to be threatening. The abuse of amphetamines remains a serious social problem. It has been estimated that, second to the depressants, the pharmacological effects of amphetamines have engendered more aggression and violence than any other drug (Goldstein, 1975).

*Premorbid Personality.* Aggression and violence due to amphetamine use are particularly likely in individuals with premorbid aggressive tendencies and problems of impulse control. Amphetamine users with latent schizophrenic tendencies also appear highly prone to violence associated with toxic psychosis. Ellinwood (1971) reviewed psychiatric evaluations of thirteen persons who had committed homicide after taking large doses of amphetamines. Four of the individuals were noted to be highly impulsive and aggressive, even after withdrawal from amphetamines. Five were diagnosed as schizophrenic after withdrawal, and in three of these cases amphetamines had evidently precipitated the more extreme schizophrenic symptoms.

While violence is most likely in premorbidly aggressive individuals, amphetamine abuse can cause violence in users with a wide variety of other personality disorders as a result of the pharmacological effects of the drug. In such cases the heightened aggression is due to the drug; however, the nature of the aggression may still be based on the premorbid personality. For

example, a premorbidly extropunitive individual may commit homicide and an intropunitive person may commit suicide, on the same dosage.

Many individuals, however, with no apparent personality abnormalities have evidenced aggression or violence during amphetamine use. In one of the earliest reports of negative effects of amphetamines, Davis (1947) found that the drug enhanced aggressiveness in apparently normal British servicemen. Connell (1958) observed hostility and aggressiveness in persons hospitalized for amphetamine-induced paranoid psychosis and noted that several of the persons showed normal personalities and backgrounds after withdrawal. In a recent literature review, Grinspoon and Hedblom (1975) discovered numerous reports of amphetamine-related aggression and violence in manifestly normal individuals. They concluded that personality disorders involving abnormal aggressiveness, lack of impulse control, unstable object relations, or paranoid tendencies may be exaggerated by amphetamines and result in violence. However, they emphasized that violence may also occur during amphetamine use by individuals with no evidence of premorbid personality disorder.

*Dosage.* Individuals may differ greatly in their reactions to the same dosage levels of amphetamines. Dosages as low as 40 milligrams have produced psychotic effects in nonexperienced users, while some experienced users have taken dosages of up to 5,000 milligrams without toxic reactions (Smith, 1969).

Typically, low dosages of amphetamines will alleviate fatigue, facilitate assertiveness, enhance mental alertness, and promote feelings of mastery and self-confidence. Low-dosage use, however, may also engender aggressiveness in the form of easy irritability and hostile attitudes and may lead to use of higher dosages. High-dosage intravenous usage may produce a "rush" (comparable, metaphorically, to a pleasurable electric shock), fascination with one's thoughts and actions, and feelings of supreme mastery and confidence. But with such intravenous usage the likelihood of extreme aggressiveness or violence is particularly great.

Characteristic of high-dosage, intravenous use is the cyclic pattern of "runs," in which there are frequent amphetamine injections over two- to five-day periods. Initially, a "run" produces considerable euphoria and rapid, decisive thoughts and actions. These effects diminish after a few hours, however, and the user must take another dosage to recapture them. With re-

peated injections, thoughts often become perseverative, and actions frequently become mechanical and repetitive. The user maintains a hyperactive state, however; he usually does not sleep during a run and shows only brief moments of calm or peace. This hyperactive state may lead to a form of aggression or violence that Carey and Mandel (1968) term a "reaching out." In the words of an official whom they interviewed: "One of the main problems we've got to face is this damned aggressiveness. These amphetamine users, they're all this way. This is the common denominator. I've seen guys that pop fifty 10-milligram pills or shoot some Meth and they're just all over—they can't stand still—they just can't keep from doing things and they're jumping around all the time. If they've got something in their hand they'll hit you without realizing what they're doing—and they'll—if they've got a flashlight they're likely to go like that [swings] and hit you with it" (p. 169).

As the run continues, the user may develop increasing suspiciousness and feelings of being watched, which evolve into delusions of persecution. Violence may then occur as a defensive reaction to imagined danger. Some person or event may be perceived as threatening, and the user may well react with force.

The user rarely eats during the run, and the combination of little nutrition and sleep may eventually result in physical exhaustion or a "crash." After the run the individual may sleep for a day or more. Upon awakening, he is likely to be extremely irritable and depressed. Heated arguments may occur, and even blows exchanged, over minor incidents (Carey and Mandel, 1968). In order to offset his negative feelings, the individual may gain resort to amphetamines, and hence another run may begin. Additionally, some individuals, after coming down from the effects of the drug, particularly high doses, may commit suicide, due to the resultant depression.

Not all individuals who use amphetamines intravenously progress to higher dosages or follow the cyclic pattern of "runs." Some individuals may use the drug intravenously once or even several times and not continue. Others may restrict their use to weekends (Brecher and others, 1972). As expected, when there is less duration or frequency of use, there tends to be less occurrence of aggression and violence (Tinklenberg and Stillman, 1970).

*Set.* An understanding and awareness of the possible effects of amphetamines can minimize the likelihood of aggression or violence. This is particularly true when paranoid ideation develops

through amphetamine use. When the individual learns to expect feelings of suspiciousness, as well as delusions of persecution, he can then treat them in a "half-serious, half-humorous, game-playing" manner (Kramer, Fischman, and Littlefield, 1967). He is thus less likely to act upon paranoid feelings with assaultiveness.

*Setting.* Individuals with a solitary life-style are particularly prone to violent reactions during an amphetamine-induced paranoid state. Having supportive persons nearby who understand the drug's effects could help in the cross-validation of delusional thinking. One function of users gathering in "flash houses" is to enable individuals to point out to each other if they are becoming too paranoid (Ellinwood, 1971).

Although other amphetamine users may help reduce paranoid reactions and extreme violence, they may increase the incidence of other forms of aggression. Griffith (1966), for instance, describes amphetamine "parties," in which mutual grievances commonly erupted into intense arguments; several persons would tease or "egg on" an individual, and rage reactions would then often occur.

*Summary.* Aggression or violence is most likely to occur during amphetamine use if (1) premorbid personality is characterized by abnormal aggressiveness, poor impulse control, or latent or overt paranoia and schizophrenia; (2) dosage levels are high and are administered repeatedly and intravenously; (3) the individual is unaware of the negative psychoactive experiences, such as feelings of paranoia, that may occur; and (4) the support of concerned persons, who can cross-validate feelings of paranoia if they occur, is lacking.

### Heroin

Heroin abusers frequently become involved in criminal activities to procure funds for drugs. In this respect, heroin has an indirect association to increased aggression. The direct effect of the drug, however, is to reduce aggression rather than increase it. Administration of the drug may create euphoria, relaxation, drowsiness, and lethargy. The euphoria (especially with intravenous injections) has been described as an initial "rush" ("like a huge orgasm") followed by a more prolonged "high" ("a profoundly heightened sense of well-being") (DeLong, 1972). During the "high," the individual may appear more relaxed and self-confident in social situations. In other situations

he may be rather passive and withdrawing and appear to be almost sleeping or "nodding out."

*Premorbid Personality.* Heroin abusers manifest a wide range of character traits; no single "addictive personality" has been identified. Many heroin abusers are highly aggressive and hostile, with histories of extensive antisocial and violent behavior prior to drug use (Khantzian, 1974; Wurmser, 1972). Others are fundamentally passive and unassertive, with strong withdrawal tendencies (Chein and others, 1964; Fort, 1966). For the drug abuser with heightened aggressiveness, heroin provides calming, relaxing effects, along with a sense of self-worth and competence. For the more passive, withdrawn individual, the enhanced feelings of self-worth may well be a primary incentive in the use of the drug. For both the aggressive and the passive user, the need to obtain funds for the drug typically requires considerable assertiveness and activity. The great majority of heroin users must constantly and aggressively pursue a series of demanding tasks to obtain funds for the drugs. As Preble and Casey (1969, p. 2) point out: "They [heroin abusers] are always on the move and must be alert, flexible, and resourceful. The surest way to identify heroin users in a slum neighborhood is to observe the way people walk. The heroin user walks with a fast, purposeful stride, as if he is late for an important appointment—indeed, he is. He is hustling (robbing or stealing), trying to sell stolen goods, avoiding the police, looking for a heroin dealer with a good bag (the street retail unit of heroin), coming back from copping (buying heroin), looking for a safe place to take the drug, or looking for someone who beat (cheated) him—among other things. He is, in short, *taking care of business*."

If a person is severely passive and withdrawn, he is not likely to be able to maintain a heroin habit and may turn to less expensive drugs, such as alcohol or amphetamines. If the individual has less severely inhibited aggressive drives, with perhaps a passive overlay, the "hustling" life-style may provide a semi-structured means or outlet for aggression. For the highly aggressive individual, the drug's effects afford brief periods of calm, while the tasks involved in obtaining the drug provide modifying, structuring influences on the expression of his aggression. However, the feelings of calm and of having structure might prevent the heroin abuser from seeking more adaptive means for the expression of aggression.

*Dosage.* Initiation to heroin usually begins with the inhalation ("snorting") of small amounts through the nose. Tolerance for

the drug builds rapidly, so that increasingly greater dosages are needed to maintain constant effects. Physical dependence may develop, with the individual experiencing intense withdrawal effects if he ceases to use the drug. The methods of taking increasing dosages are likely to change to subcutaneous injections ("skin popping") and then to intravenous injections ("mainlining"). Some individuals are able to continue to achieve satisfying effects through "snorting" or "skin popping" relatively low dosages (Chein and others, 1964). The majority of chronic heroin users in the United States, however, eventually increase dosages and proceed to mainlining.

Increasing dosages are indirectly related to aggression through the frequent need for criminal activities to obtain funds for the drug. While many chronic users support their habits at least partly through legitimate means, the great majority eventually resort to criminal activities. Contrary to popular opinion, a relatively low percentage of crimes committed by narcotic abusers are crimes of violence. An analysis of Chicago police records showed that only 20.5 percent of crimes by narcotic abusers involved assaults, robberies, sex offenses, or weapons charges; in contrast, 42.4 percent of crimes by the criminal population in general involved those crimes. For the narcotic abusers 79.5 percent of the crimes involved larceny or crimes against property, while for the general criminal population the percentage was 57.6 percent (Finestone, 1966).

The relatively low rate of violence for narcotic abusers is understandable considering their need for a stable source of income. Conflicts must be avoided if at all possible, so that the individual may return again and again to the same or similar settings. Above all, the individual must avoid being apprehended and having to detoxify "cold turkey" in jail. As Waldorf (1973) observed, the heroin abuser commonly becomes highly skilled and efficient at his hustle. In a short time, he learns to size up situations precisely and quickly and to determine which persons or articles are vulnerable to theft. He learns which situations can bring him cash or easily sellable materials, and he becomes extremely sensitive to individuals or situations that pose a threat. *Set.* Expectations regarding the pharmacological effects of heroin have little direct influence on aggression. Indirectly, an awareness of the cyclic effects of the drug may influence the occurrence of aggression by enabling the individual to avoid or to manage withdrawal symptoms. After four to ten hours of abstinence, the user may experience intense agitation, restless-



ness, tremors, chills, and sweating. If he has not planned well to obtain a supply of drugs or if his usual source is unexpectedly eliminated, he may act rashly to obtain a supply quickly. If, for example, he feels that others are voluntarily withholding drugs from him, anger and assault may occur (Tinklenberg and Stillman, 1970). Ironically, then, the absence of heroin—rather than the use of the drug itself—may result in aggression or violence.

*Setting.* Violence is often associated with the heroin abuser's participation in the drug trade. While the individual may have avoided violence in "hustling" for funds to obtain heroin, violence may occur through his attempts to buy and retain the drug. He may be sold a short or an adulterated supply and then react with vengeance when he again meets the seller. Once he obtains a supply, he may be a victim of violence, as other drug users, aware of his daily patterns, attempt to rob him. Statistics are unavailable on assaults associated with drug dealing, since drug abusers are obviously not in a position to register complaints with the police. It is estimated, however, that the percentage of violence is considerable (Waldorf, 1973).

*Summary.* Aggression or violence is not likely to result from the pharmacological effects of heroin but may result from (1) criminal activities to procure the drug, (2) panic reactions to impending withdrawal symptoms, and (3) assaults associated with the selling or possession of the drug.

### Lysergic Acid Diethylamide (LSD)

From 1943, when the psychoactive properties of LSD were discovered, until the early 1960s, there was little public concern about potential adverse reactions. During that early period, the drug was tested extensively in psychotherapy with relatively few reported negative occurrences. Cohen (1960) and Cohen and Ditman (1963) surveyed forty-four psychotherapists who had administered either LSD or mescaline to almost 5,000 persons on more than 25,000 occasions. They discovered that the major problems in the use of LSD were psychological complications consisting of prolonged psychotic reactions and attempted suicides. Instances of aggression or violence were very rare and consisted mainly of paranoid reactions and the release or expression of preexisting psychopathic and asocial tendencies.

In the mid 1960s there was a rapid growth in illicit use of LSD. This development was given considerable impetus from

publicity attending use of the drug by Harvard professors Timothy Leary and Richard Alpert. In the "street use" of LSD, the drug frequently was taken under poorly supervised conditions, in which dosage levels and drug quality were not fully known. Adverse reactions or "bad trips" from the drug were commonly reported and consisted primarily of panic reactions to the drug's effects. The user's behavior during a panic reaction was generally poorly organized but could inadvertently result in harm to himself or to others who may have been attempting to aid him. Suicides and homicides were infrequent, although some have been documented in the medical literature (Smart and Bateman, 1967).

At present, in comparison to alcohol, amphetamines, and heroin, LSD shows only a minor association to aggression and violence. However, in comparison to other hallucinogens, particularly marijuana, LSD evidences a greater potential for extreme negative effects, including violence (National Commission on Marijuana and Drug Abuse, 1972; Tinklenberg and Stillman, 1970). Because of LSD's greater potential for adverse effects, compared to the other hallucinogens, LSD has been selected for review in this chapter.

*Premorbid Personality.* Individuals with aggressive character traits and poor impulse control are especially prone to aggressive impulses and behavior while under the influence of LSD. In a laboratory setting, Klee (1963) administered doses of LSD up to 16 milligrams per kilogram (mg/kg) to several hundred volunteers who had no known history of psychiatric disturbances and who functioned well at work. He observed that some subjects felt overwhelmed by assaultive impulses and found it difficult or impossible to control their behavior; a majority of these subjects were particularly aggressive and impulsive to begin with.

In another laboratory study, Cheek and Holstein (1971) gave dosages of LSD up to 100 milligrams to four-person groups of alcoholics, schizophrenics, and "behaviorally aggressive" reformatory inmates. Doses up to 200 milligrams were given to an additional four-person group of alcoholics. An analysis of within-group interactions indicated that, with increasing dosage, the reformatory inmates had an increase in negative social-emotional behaviors; the two groups of alcoholics had a rise in positive social-emotional behaviors; and the schizophrenics had increases in both positive and negative behaviors. For the reformatory inmates, there was greater projected hostility at low dosages and greater overt hostility at high dosages. For the

schizophrenics, at low dosages there was greater projected hostility but also greater frequency of mutual agreement and show of friendly gestures. At high dosages there was a drop-off in activity.

In five LSD-related homicides described in the medical literature, premorbid personality disturbances were prevalent. In one case a 32-year-old male with a history of chronic paranoid schizophrenia stabbed his mother-in-law to death while he was under the influence of LSD (Barter and Reite, 1969). In a second instance a 25-year-old female with premorbid psychotic depression killed her boyfriend with a knife three days after receiving LSD in psychotherapy (Knudsen, 1965). In a third episode, a 22-year-old male with a paranoid character structure developed paranoid delusions under the influence of LSD and fled from the United States to Israel, where eight days later he stabbed a stranger (Reich and Hepps, 1972). In a fourth occurrence a 22-year-old male, who was judged to have an undefined personality disorder, shot a girl friend to death two days after using LSD (Klepfisz and Racy, 1973). In a fifth episode a 24-year-old male, who had several previous arrests for assault during alcohol intoxication, shot a stranger to death while under the influence of both alcohol and LSD (Barter and Reite, 1969).

In at least four of the five cases just mentioned, premorbid personality appeared to play a dominant role in the occurrence of violence. Glickman and Blumenfield (1967) make the point that premorbid personality may be such an overriding factor in LSD-related homicides, suicides, and psychoses that the events would have occurred with or without the drug. Furthermore, they assert that the use of the drug may have delayed such events, through the individual's belief that the drug would help alleviate his emotional stress. With the small data base, it is not possible to confirm or deny Glickman and Blumenfield's hypotheses, but their assertions remain as alternative possibilities.

*Dosage.* In LSD dosages of .5 mg/kg and above, there commonly is an initial period, of up to a half hour, in which somatic effects such as lightheadedness, chilliness, and nausea are experienced. Then alterations may occur in perceptions of the size and shape of objects and surroundings, and the individual may experience intense feelings of wholeness or oneness. Illusions may occur of brightly colored images, in varying patterns, moving across the perceptual field. There also may be hallucinations

of beautiful objects or loving persons ("good trip") or of grotesque, terrifying demons or persons ("bad trip"). In the instance of a bad trip, ideas of reference and paranoid delusions are common (Wikler, 1976). As noted above, with the occurrence of a bad trip or panic reaction, there is an increased likelihood that the person will harm himself or others, perhaps those who are trying to help or restrain him.

In a review of LSD's effects during psychotherapy, Cohen (1960) determined that adverse reactions tended to appear with dosages above 75 milligrams. A danger in the widespread use of blackmarket or "street" LSD is the possibility that someone will receive an unexpectedly high dosage of the drug. With the differing procedures used among illicit manufacturers of the drug, there may be considerable differences in drug potency. As Brecher and associates (1972) point out, an individual who has become used to the effects of a certain general dosage level may have an acute panic reaction if he takes an unusually high dosage. Just such an occurrence was suspected in one of the five homicides reported in the medical literature (Reich and Hepps, 1972).

*Set.* Preparedness for the LSD experience and a positive mood at the time of use are considered highly important in precluding adverse reactions. Leary, Metzner, and Alpert (1964) suggest that, before using LSD, a person take considerable time to put himself in a constructive frame of mind and in a favorable mood for the experience; they recommend that the person read descriptions of the nature of the LSD experience from sources such as the *Tibetan Book of the Dead*. These preparations, however, may not be sufficient to prevent negative reactions. Ungerleider and colleagues (1968) found that many persons hospitalized from adverse LSD trips had been experienced users who had taken precautions similar to those just mentioned. Such precautions, then, may be helpful but do not guarantee against adverse complications.

*Setting.* In unsupportive settings there is a greatly increased likelihood of adverse reactions to LSD, perhaps resulting in injury to the user or to others. As has often been emphasized, a concerned person or guide should be present during an LSD experience, and the surroundings should be comfortable and free of interruptions (Cohen, 1960; Leary, Metzner, and Alpert, 1964). In psychotherapeutic settings these conditions are generally observed. With illicit use of LSD, however, there is an increased chance that the user will take the drug alone or with others who

are also "tripping." In such instances the individual would not be able to rely on the reassurances of others if he should develop negative reactions; in addition, the adverse reactions of one of the other persons could elicit or add to his own negative experience. In some instances of illicit LSD use, adverse reactions have been aggravated when persons were taken to jails or to hospital emergency rooms, where there was little experience in either diagnosing or treating the reactions. The unfamiliar surroundings, as well as ineffectual treatments such as washing out the person's stomach, may have complicated the negative effects (Brecher and others, 1972).

*Summary.* It is relatively uncommon for aggression and violence to occur under the influence of LSD, especially under psychotherapeutic supervision. When aggression or violence does occur, it is most likely that (1) premorbid personality is characterized by paranoid character structure or schizophrenia, (2) dosage levels are high (75 milligrams or more), (3) the user is apprehensive about the experience and/or is in a negative mood, and (4) the user is with persons who alarm him.

### Multiple Drug Use

An evaluation of the effects of drugs on aggression and violence is complicated by the prevalence of multiple drug use. Most individuals who abuse drugs have been found to abuse more than one substance (National Institute on Drug Abuse, 1975). In a study of 1,239 incarcerated narcotic abusers, for example, over half of the subjects (624) acknowledged using more than one drug on a continuous basis (Abeles and others, 1966). In a survey of fifty individuals in a hospital drug program, the following percentages for use of different substances were noted: heroin, 100 percent; cannabis, 100 percent; hallucinogens, 93 percent; amphetamines, 99 percent; cocaine, 83 percent; barbiturates, 75 percent; and commercial solvents, 68 percent. Alcohol use was not directly measured but appeared to be very prominent (Kramer, 1972). Individuals with numerous or severe ego deficits are especially likely to use multiple drugs (Pittel and Hofer, 1972) and—because of this combination of severe deficits and multiple drug use—are potentially more dangerous than persons who show specific drug preferences.

Drugs may be used in combination or in sequence. When used in combination, the substances may interact to produce more frequent or more extreme aggressiveness and violence than

would likely occur from any of the substances used alone. Alcohol and amphetamines are particularly dangerous. The alcohol may reduce impulse control, while the amphetamines provide energy and allow the individual to be active when he otherwise would collapse (Ellinwood, 1971). LSD and amphetamines are also especially dangerous together. The amphetamines intensify and prolong the psychoactive effects of LSD and produce so many more panic reactions than LSD alone that the combination is commonly referred to as the "death trip" (Hoffman, 1975). One primary cause of the panic reaction is the muscular tremors and general physical agitation induced by the amphetamines. LSD and alcohol are not commonly used together, but the potential for violence is high when the disorienting effects of LSD are combined with reduced impulse control from alcohol. The potential hazards when they are taken together is well illustrated in the homicide described by Barter and Reite (1969), referred to earlier.

Certain drugs may interact to reduce the likelihood of aggression and violence. Heroin may be taken with amphetamines or cocaine (the traditional "speedball") to increase the "rush" from the heroin and to take the edge off the adverse effects of amphetamines such as hyperexcitability and tremors. Heroin may be used with alcohol to heighten the "high" from both drugs and may have calming effects on aggressiveness elicited by the alcohol alone. This last combination, however, is highly dangerous to the user, for the joint depressant effects of the substances greatly increase the potential for drug overdose and death. Just such effects were indicated in the deaths of rock stars Jimi Hendrix and Janis Joplin (Brecher and others, 1972).

Sequential use of drugs may reflect many factors, such as availability or cost of the drugs, curiosity, peer influences, or changing needs of the user. When one drug is used instead of another, there may be a change in the potential for aggression or violence. As may be noted in the above reviews of alcohol, amphetamines, heroin, and LSD, one drug may have a greater or less potential for increased aggressiveness and violence than other drugs, depending upon the particular individual's pre-morbid personality, dosage levels used, set, and setting. Additionally, individuals may use one drug in attempting to withdraw from another drug. For example, amphetamine or heroin users often use alcohol to offset extreme irritability, physical discomfort, or depression during amphetamine or heroin withdrawal. But persons who give up or "kick" amphetamines or

heroin often become highly dependent on alcohol. Hence, the long-range effects may be a continuance or even an increase in aggressiveness or violence.

### Treatment

Treating the violent substance abuser involves dealing with (1) the physical intoxication, if present; (2) the premorbid personality of the abuser; (3) the setting or environment in which the intoxication occurred; and (4) any psychological or social problems developing as an outcome of the abuse. Such variables as dosage or set while taking drugs are of course eliminated when the drug use itself ends.

*Physical Intoxication.* Prior to any other treatment, the individual must be detoxified from the drug. Therapy with any person under the influence of a drug means dealing with someone in an altered state of consciousness; with the violent substance abuser, treatment can be not only futile but also dangerous. Such individuals often have to be restrained and/or medicated before detoxification can begin.

A very important role of detoxification, after the acute medical emergency has been resolved, is getting the patient in a frame of mind to attempt rehabilitation. The violent substance abuser can probably best be treated by a multidisciplinary detoxification staff. Staff members must avoid a critical and punitive attitude and show genuine concern for an individual who may have just committed a violent crime. They also must understand that certain drugs or combinations of drugs can produce violence in aberrant premorbid personalities and that the interactions of environment, set, drug, and dosage could lead any individual to lose control. If the patient is treated with the same concern and compassion that any other nonviolent substance abuser would receive, behavioral problems are further obviated. The staff must also show confidence in the person's ability to maintain control once he has attained it again, because this is a tenuous period, where some individuals with weak egos can lose control if they feel that others expect them to do so.

Additionally, the staff can use the detoxification phase as a learning experience for the recovering patient by exposing him to the facts and implications of drug use and his previous anti-social behavior. Furthermore, at even this early phase, family and friends, other patients, and social and religious influences,

when appropriate, can be utilized to show the patient that he is still cared for and that his condition is treatable.

*Premorbid Personality.* Where the drug itself is not the primary cause of the violent behavior, treating the premorbid personality is especially vital. This requires considerable diagnostic skill in order to determine whether (1) the individual is violent and his substance abuse incidental to his violent personality, (2) the individual has violent tendencies that are exacerbated by substance abuse, or (3) the person's violent behavior is caused primarily by his substance abuse alone. The first two types of individuals require extensive postdetoxification treatment, while the last may simply require abstinence to avoid further violent episodes. A thorough psychosocial history, a psychiatric and psychological assessment, and knowledge of what drugs at what dosage were abused are necessary for a determination of the nature and extent of treatment required.

Premorbid personalities encountered include explosive personalities, antisocial personalities, inadequate personalities, and passive-aggressive personalities. They may also include individuals out of touch with reality, such as paranoid schizophrenics. Furthermore, premorbidly depressed individuals can become violent toward themselves during substance abuse. Following detoxification, these premorbid problems must be treated. If they are untreated, violence may eventually occur, even without the effects of drugs, and future substance abuse could occur with a great likelihood of further violence. Treating these diverse disorders is the subject of many articles and books (see, for instance, Chapters Nineteen, Twenty-One, and Twenty-Two in this volume) and will not be repeated in this chapter. We will make only a few key observations and distinctions.

Explosive personalities and antisocial personalities—as well as some inadequate personalities, who may react with poorly controlled hostility as part of their ineffectiveness when under stress—often can deal with frustration or uncomfortable feelings only through direct action. When they are frustrated, when internal tensions are high, or when circumstances are difficult, such individuals may resort to aggression-enhancing drugs and thus further increase the likelihood of violent behavior. These persons may never have had adequate self-control, the knowledge of alternatives to direct aggressive action, or the ability to utilize such alternatives. Therefore, therapies designed to build ego strength can be utilized as part of constructive as opposed to reconstructive psychotherapy. Milieu programs com-



bined with constructive psychotherapy approaches are therapies of choice.

In passive-aggressive or passive-dependent individuals, who utilize drugs to disinhibit the aggressive sides of their personalities, psychotherapy designed to help the persons integrate both sides of their personalities while not utilizing drugs is required. An individual who is passive and outwardly acquiescent or even overly solicitous while not taking drugs and becomes violent while taking drugs must be helped to express his aggression through appropriate self-assertion. That is, through dynamically oriented psychotherapies, both individual and group, he must be helped to acknowledge that both sides of his personality—even the ego-dystonic aggressive side—belong to him. Behavioral approaches, which attempt to extinguish the drug use along with the violent behavior, also can be effective if other appropriate outlets for the aggressive feelings are presented as alternatives.

*Environment.* Treating the interpersonal environment of the violent substance abuser can also be critical. The individual's spouse, family, or friends may have contributed to the development of drug problems, and negative influences of these individuals may well have to be counteracted if rehabilitation is to progress. For example, hostile, interlocking-dependent relationships or sadomasochistic relationships may predate substance abuse and aggressive or violent actions. Marital counseling and family therapy may be indicated. Psychotherapeutic interventions with friends could be attempted if the friends are particularly significant in the drug user's life and if they are willing to become involved. Alternately, in individual psychotherapy with the drug abuser, a primary focus could be placed on his developing more adaptive means of relating to his friends, and emphasis could also be placed on engendering the motivation and capacity for him to establish new, more constructive relationships.

The physical and social environment of the violent substance abuser also can be treated. For instance, the individual's frustrations and feelings of inadequacy can be reduced if he is given guidance in finding new places to live, vocational and educational rehabilitation, sources of recreational activities, and other outlets for abilities and feelings. Some activities, such as competitive sports or hobbies, can be chosen specifically to include appropriate outlets for aggressive drives.

*Subsequent Problems.* Psychological and social problems that develop as a result of substance abuse and aggressive or violent

behavior create an additional focus for follow-up treatment. The person may have to come to terms with negative feelings resulting from reactions to what he or she had done while using drugs. Guilt and self-abasement may well have resulted from drug use or from subsequent aggression. Such individuals may require individual and group psychotherapy, as well as environmental rehabilitation, but the treatment will be of a more short-term and reconstructive nature when the problems do not pre-date the drug use.

*Summary.* Treatment of substance-induced aggression is most effective when (1) the individual is detoxified prior to any other rehabilitation; (2) premorbid personality is properly diagnosed and approaches appropriate to each diagnosis are employed; (3) significant others in the interpersonal environment are involved in the treatment and necessary changes in the physical environment are fostered; (4) problems resulting from violent substance abuser are not overlooked; and (5) a multidisciplinary approach—which blends the complementary skills of many different disciplines, such as psychology, psychiatry, medicine, social work, nursing, and rehabilitation medicine—is utilized.

# Aggression in the Laboratory

*John Sabini*



A chapter on human aggression in the laboratory can no longer hope to be exhaustive. Books have been devoted to reviews of this literature from different points of view (Bandura, 1973; Berkowitz, 1962; Buss, 1961; Geen and O'Neal, 1976). Our more modest aims will be to summarize the major lines of research and translate into ordinary language whatever insights about human aggression experimental psychology has produced. A theoretical-experimental jargon may be a useful shorthand, but it can also hide commonsense understandings behind a formidable camouflage that inhibits critical scrutiny except by those vested in jargon.

## Frustration and Aggression

The dominant idea guiding research on human aggression has been that frustration leads to aggression. The original form

of this proposal was offered by Dollard and his colleagues (1939, p. 1): "The occurrence of aggressive behavior always presupposes the existence of frustration and, contrariwise, the existence of frustration always leads to some form of aggression." This use of aggression is broader than the concept's use in everyday discourse. We usually distinguish aggression, an unprovoked first attack, from self-defense, retaliation, retribution, or legitimate punishment. Psychological theories have used a less articulate notion of aggression to include any intentional harm-doing. Frustration is used with its ordinary meaning: a blocking or thwarting of an individual's pursuit of some goal. This formulation was overstated, as its authors quickly realized; thus, one of them (Miller, 1941, p. 338) argued for a chastened version: "Frustration produces instigations to a number of different types of responses, one of which is an instigation to some form of aggression." From a commonsense point of view, this version—that there is some link between being frustrated and becoming aggressive—is appealing, since the feeling of being frustrated and the desire to lash out seem to belong together. As empirical support for this intuition, Hovland and Sears (1940) discovered that the number of lynchings of blacks in the South was related to the price of cotton. The lower the price of cotton, a frustrating circumstance for a cotton-dominated economy, the more blacks were lynched, a clearly aggressive act.

The way in which frustration leads to aggression can be viewed from at least two contrasting perspectives. One view—a sociological-rational perspective advanced by Merton (1949), for example—is that in bad economic times people are unable to achieve socially valued goals in routine ways; hence, they are likely to use "innovative," extraordinary means to achieve those goals. The lynching of blacks by poor whites is a means to enforce social domination when other avenues are blocked. Frustration leads to aggression, then, only because the aggression is often a means of achieving a valued goal. In contrast, according to the psychological-irrational view, typified by Freud (1933b), aggression is not simply one of a variety of ways of getting what one wants; rather, it is a direct consequence of the thwarting of desires. Undischarged drives contribute their energy to the id, the reservoir of sexual and aggressive instincts. When the level has reached a critical point, overt aggression results. Dollard and his colleagues (1939) also adopted a nonrational, intrapsychic view linking aggression with the frustration of drives. They saw their version as an attempt to integrate Freudian insights with

the principles of learning established in laboratory studies of rat behavior.

Early experimental work on frustration and aggression did not carefully analyze "frustration" or distinguish between instrumental and irrational aggression. Two recent investigations have dealt with this distinction. Buss's (1966) study seems to show that frustration per se is, at most, a weak instigation of aggression unless one believes that one can achieve some desired outcome by aggressing. Buss developed this evidence in the context of a "learning experiment." Subjects were told that they were taking part in a study in which they were to give another subject (a "partner") a shock every time he made an error on a standard learning task. They were to administer the punishment by using a shock generator which had ten levels, ranging from the very mild to the quite painful. They were instructed to administer the shock but were free to choose whatever level they wanted. (In an experiment of this sort, the level of shock that subjects choose is taken to be a measure of aggression.) To study the effects of frustration, and the instrumental value of aggression, different groups of subjects were given different further details about the learning task. To create conditions of frustration, some subjects were told that their own "know-how" was somehow responsible for their "partners'" quickness in learning the task; other subjects were told that their grade in an introductory psychology course might depend, in part, on how quickly the "partners" learned. (The "other subject" in all conditions was a confederate of the experimenter, who got a fixed number of questions right and a fixed number wrong. No actual shocks were ever delivered.) These instructions were designed to make the confederate's errors frustrating for the subject, since the errors would show that the subject lacked the requisite "know-how," or they might cost the subject a grade in his course. If frustration leads to aggression, then, subjects in these conditions ought to use higher shock levels than subjects who were not told of a link between the confederate's performance and their own ability or grade.

Buss wanted to compare two views in his study: (1) the view that aggression is an irrational consequence of a feeling of frustration and (2) the view that aggression is one means of surmounting a frustrating situation. Therefore, he told some subjects in each of the above groups that higher levels of shock would lead to quicker learning. These subjects had a reason to use higher levels of shock; they believed that they would there-

by be performing their task most effectively. Thus, some subjects were frustrated without being led to believe that aggression would be of any use, while other subjects saw aggression as the best way of teaching the material. Buss found that subjects who were merely frustrated by the confederate's errors did *not* use appreciably higher levels of shock, whereas those who believed that higher levels of shock would facilitate learning *did* increase the amount of shock delivered. Thus, he concluded that frustration does not lead to aggression unless people perceive that the aggression will be useful in ridding themselves of the frustration. (Rule and Percival, 1971, have conducted research which they take to be a demonstration that frustration can lead to aggression independent of its instrumental value. Such an interpretation is questionable, however, because there is some evidence that their subjects perceived the aggression as having instrumental value without explicit instruction from the experimenter.)

The "aggression" displayed in Buss's experiment is somewhat removed from aggression as we usually think of it. First, subjects shocked the confederate because the experimenter told them to, making it a legitimate context to do so. Whether the shock had instrumental value or not, subjects would be extremely unlikely to harm a fellow participant without overt instruction from an authority. Second, when the confederate screamed in pain, subjects reduced the shock level. It is, in fact, very difficult to induce adults to engage in physical abuse, or even verbal abuse, in a laboratory. With some exceptions, psychologists have had to content themselves with observing "measures of aggressive tendencies" rather than aggression itself. In the typical experiment, some subjects (usually undergraduate males) may evaluate someone unfavorably (when asked to make some evaluation by an experimenter); or they may report that they are angry, when asked; or they may administer mild shock to someone if the experimenter implies that it is legitimate, or even necessary, to do so. Findings of this less extreme kind are considered important, because it is assumed to be a matter of degree whether a person evaluates another unfavorably on a questionnaire or kills him in a rage. The research assumes that the same conditions which lead one to evaluate another unfavorably will, if suitably magnified, lead him or her to kill another.

But instrumental aggression is not the only kind of aggression. Another kind is impulsive aggression (Berkowitz,

1974), or, more simply, anger. It was anger that the frustration-aggression hypothesis was most clearly designed to explain; yet, as Buss found, frustration per se does not lead to anger. If frustration is not the cause of anger, what is? According to Aristotle, the perception that one has been insulted leads to anger. Of course, one might argue, as Berkowitz (1962) does, that an insult is a form of frustration—the frustration of an ever active drive for self-esteem; but it is at best a very special form of frustration, very far from the original notion of a blocking of an individual's active pursuit of some goal. The claim that frustration lies at the heart of aggression seems clearly different from the view that anger is a reaction to insult. Curiously, when psychologists have tried to produce anger in the laboratory, even when they have written about their results in terms of the consequences of frustration, they have not relied very much on frustrating people but have much more commonly insulted people—possibly because it is very difficult to make adults angry just by frustrating them. Thus, in one of the earliest studies of anger in the laboratory, McClelland and Apicella (1945) arranged for subjects to fail a test; then the experimenter belittled the subjects for their performance. They found that the most common response to this humiliation was anger and that the more the experimenter humiliated the subjects the more angry they became.

There is a large body of research devoted to the relation between insults and anger. Berkowitz (1960), for example, had a confederate express a depreciatory attitude toward the subjects (who were fellow college students) and toward life at the university (of which they were both members); he found that these subjects then evaluated the confederate less favorably than did a control group to whom the confederate did not express such views. The effect was particularly strong when the confederate had initially been friendly to the subject. Pepitone and Reichland (1955) found that subjects were more likely to evaluate an experimenter unfavorably if they were insulted in a group, and if the group was a cohesive one, than if they were insulted individually. Strickland, Jones, and Smith (1960), in the same vein, found that subjects who were insulted by a confederate became more hostile to him if they were led to believe that the insults were unfounded than if there was consensus that the unfavorable comments were true. Gillespi (1961) asked three groups of subjects to take an "Abstract Abilities Test," presented to them as a measure of their IQ. The subjects in one

group were allowed to complete the task; the subjects in the second group were stopped before they could finish; and in the third group the subjects were stopped and also had their intelligence attacked by a confederate. The subjects in group 2 (who had been made to look unintelligent by being stopped early but who were not insulted by the confederate) were more likely than those in group 1 to give aggressive associations to aggressive words in a word-association task. Subjects in group 3 (who were made to appear stupid and also were overtly insulted) were more likely than those in group 1 to unscramble letters to form aggressive words (when the letters could also be unscrambled to form neutral nonaggressive words). Both groups interrupted before finishing were more likely to express negative attitudes toward the experiment. Geen and Berkowitz (1967) asked a subject and a confederate, after seeing an aggressive movie, to solve a jig-saw puzzle. The confederate always succeeded. Some subjects were given solvable puzzles; others were given unsolvable puzzles. Some of the subjects given unsolvable puzzles were also overtly insulted by the confederate. Those who were given unsolvable puzzles—puzzles that they had just seen the confederate solve—became angry; those who were also insulted by the confederate became more angry. Similarly, Geen (1968) found that task frustration produced some aggression but that insults produced more.

Aristotle's claim that insult leads to anger, although plausible and supported by a large number of experiments, is too limited as a claim about the *only* cause of anger. Perhaps frustration as well as insult causes anger. The research seems to show, however, that even this claim about frustration is too broad. Doob and Sears (1939), to show that frustration leads to anger, presented a group of subjects with descriptions of sixteen frustrating situations and asked them to report how they would react. The results seemed to show that these frustrations made people angry. Pastore (1952) noted, however, that all the situations used by Doob and Sears involved not only frustration but *unjustified* frustration. In one situation, for example, a bus driver passed by a bus stop, thus frustrating the customer's desire to get on. Arguing that the reason for the frustration would affect whether or not people got angry, Pastore constructed sixteen additional descriptions of frustrating situations. Each of these new situations contained the same frustration as one in the original set, except that the frustration was justified. The rewritten version of the bus incident, for example, contained



the information that the customer noticed that the bus said "garage," indicating that it was out of service. Pastore found that subjects expressed much less anger when the frustration was justified than when it was not.

Pastore's findings relied on what people said they would do, not on actual observations of their behavior. Rothaus and Worchel (1964) sought to explore what people would really do by asking subjects both what *they* would do and what they thought "other people" would do in the situations that Pastore used. This, also, is far from studying actual behavior, but the authors suggest that questions about what others would do constitute a "projective test" of aggression, telling us about people's "real" inclinations. Subjects predicted less hostility toward justified frustration than toward unjustified frustration, but the difference was greater in self-reports than in the guesses about others. Perhaps these subjects had an overdeveloped cynicism about the behavior of others.

Burnstein and Worchel (1962) attempted to map out the effects of a justifiable context more directly. They designed three experimental conditions: (1) a confederate attended a discussion group made up of undergraduates but did not interfere with the discussions; (2) the confederate did interfere with the discussions (that is, he asked the subjects to repeat things they had just said, thus interrupting the discussions) but was wearing a hearing aid, which, he complained, was broken; (3) the confederate interrupted the discussions but offered no excuse. Subjects were then asked, both publicly and privately, whether they would like any of the members of the group excluded from future group sessions. When asked publicly, subjects in the third experimental condition were more likely to ask to have the confederate removed than were subjects in the first and second conditions. When asked privately, however, subjects were less responsive to the hearing aid; subjects in conditions 2 and 3 were more likely to ask to have the confederate removed than were subjects in condition 1 (whose discussion was not interrupted). Burnstein and Worchel took these results to mean that a justification of a frustration does not diminish the degree to which we become angry when frustrated, but it does affect whether we express that anger overtly. This interpretation of the results is not fully compelling. Is the question of whether the confederate should be removed from the group related to anger or aggression, or is it related to a more pragmatic question about the efficiency of the group? A baseball player who can't

hit may be asked to leave the team, but that has nothing to do with whether the other players or the coach are angry with him. Perhaps, then, subjects in the Burnstein and Worchel experiment were less likely to ask publicly to have the "hearing-impaired" confederate removed because they were reluctant to seem impolite by calling attention to his disabilities.

Although people do sometimes get angry, even when they realize that a frustration is justified, it is hard to imagine a society where people typically react in the same way to justified and unjustified frustrations. Civilized social life is dependent on an individual's drawing a distinction between the frustration of his desires and the infringement of his rights. Since in everyday life, especially in crowded cities, people frustrate one another constantly (taking the last seat on the subway, moving slowly getting off, arriving early enough to be in the front of the line at a box office), if reactions to frustrations were not tempered by consensual notions of right and wrong, we would live in the Hobbesian version of the natural state of man—perpetual war of all against all.

Although it is difficult to imagine a society that does not distinguish between frustration and transgression, treating the latter more severely than the former, in at least one society frustrations do not appear to provoke much reaction. Bateson (1941) claims that the Balinese appear to be simply indifferent to interruptions of activities they are engaged in—that is, to frustrations. This is not to say that the Balinese do not become angry. They do. They become very angry, for instance, if a member of the group rustles cattle or welshes on a debt incurred over a bet about a cock fight; these transgressions of the social rules of life produce anger in a way that simple frustration does not.

### Arousal and Aggression

What is left of our commonsense intuition that the feeling of frustration is associated with a desire to lash out? One feature of frustrating situations—and, of course, cases in which we are angry—is that in both situations we are quite worked up. They are associated with some sort of feeling of tension and its release. Perhaps what is of value in our intuition about frustration and aggression can be saved if we examine this aspect of the phenomenon.

In the usual or typical case of anger, someone is trans-

gressed; he or she becomes angry and does something hostile. Since the transgression causes both the arousal and the hostile action, it is difficult to determine whether the arousal *per se*, independent of its provocation, has a causal role in the level of expressed hostility. Experiments on arousal have attempted to determine how arousal which is a result of something *other than a provocation* affects the degree of hostility. The usual experimental method is to expose people to heat, noise, or erotic stimuli and then determine whether subjects aroused by these conditions aggress more than control subjects not exposed to such stimuli.

Geen and O'Neal (1969), for example, used noise and an assumed provocation. Some subjects were shown a boxing film clip, and others were shown a nonaggressive film. Subjects in both groups were then given a socially sanctioned opportunity to shock a confederate—some in the presence of an arousing but not annoying noise; some with no background noise. For subjects who saw the nonaggressive film clip, the presence of the noise had no effect on the amount of shock they gave the confederate; that is, they gave no more shock than those who were not exposed to the noise did. Subjects shown the aggressive clip, however, were affected by the noise; those exposed to the noise gave more shock than those not exposed to the noise. Knipmeyer and Presthaltdt (1973) obtained similar results with a procedure akin to Geen and O'Neal's. Konečni (1975) used louder noise, above the threshold of annoyance; when subjects had been insulted by a confederate, the noise intensified the amount of shock delivered, but it had no effect when subjects had not been insulted. Harris and Huang (1974) exposed subjects to noise and insult. They told some subjects that the noise would produce arousal; others were not forewarned. Those who were forewarned were less responsive to the insult than those who were not forewarned. The warning allowed subjects to discount the noise. Thus, although noise can intensify aggressive responses, this intensification is most likely to occur when subjects have also been provoked; it is less likely when subjects are aware of the effect of the noise and can discount it. Of course, the subjects in these experiments were exposed to the noise for only brief periods of time. These experiments do not touch on the question of people's ability to discount irritations when they are chronic, such as living near an airport.

Heat is known to have arousing effects; so, in line with the previous results, we might expect that heat would facilitate

aggression. Baron (1972) found that subjects exposed to high temperatures (roughly 91°F) showed less aggression than subjects in a relatively cool room (roughly 74°F). Baron and Bell (1975) found that heat intensified aggression in subjects who had not been provoked but inhibited anger in those who had been provoked. Interviews with subjects suggested that the heat, in combination with the insults of the confederate, made the situation so unpleasant for them that their first concern was to get out of the experiment. They may have decided that they would get out faster if they delivered few shocks than if they took time to shock more. The heat may also have served as a mitigation, since subjects may have decided that it was the heat that made the confederate insult them. In any event, heat obviously has effects other than arousing people. It can fatigue them, distract them, and, most of all, make them want to get cool. Which of these effects predominates in any given case clearly depends on the exact details of the situation.

Several experiments have investigated the effect of sexual stimuli on aggression. This particular kind of stimulus is of interest not only because, like heat and noise, it produces physiological arousal but because in Freudian thought there are direct links between aggression and sex (Freud, 1933b). Further, unlike heat and noise, sex is pleasant. Research on this issue has yielded conflicting results. Some investigators (Jaffe and others, 1974; Meyer, 1972), for example, have found that sexual arousal enhances aggression. Others (Baron, 1974a, 1974b; Baron and Bell, 1973) have found the reverse. Donnerstein, Donnerstein, and Evans (1975) found that pictures of female nudes inhibited aggression in angered male subjects, while pictures of explicit sexual activity did not affect angered subjects' level of aggression. Baron and Bell (1977), similarly, found that exposure to mildly erotic stimuli inhibited aggression, while exposure to more explicit material had no effect on aggression. Unfortunately, the various studies of sexual arousal have used quite different materials. Some have used films of sexual behavior, while others have used written descriptions. If, as the Baron and Bell (1977) and Donnerstein, Donnerstein, and Evans (1975) studies suggest, the effect of sexual material on aggression depends on the level of arousal, it is important to measure this arousal directly, or at least to use the same material from study to study.

Perhaps the clearest line of research on the effects of arousal on aggression has derived from Schachter and Singer's

(1962) work on the nature of emotion, especially the relation of physiological arousal to emotion. Zillmann and his coworkers have applied this Schachter and Singer framework to the study of aggression. To appreciate this work on aggression, we must first consider the original Schachter and Singer study of emotion.

Schachter and Singer began with a simple question: What is an emotion? One view is that the distinct emotions *are* distinct physiological states. Thus, a person who is afraid, for example, is experiencing a distinct pattern of internal sensation. Someone who is angry is experiencing a different internal state. When a person tells us that he is experiencing an emotion, he is reporting which of these patterns of sensations is present. If this analysis were correct, it would provide a simple way to explain the link between emotion and action. We could imagine that the distinct physiological states (associated with the distinct emotions) were directly connected to desires to engage in particular actions. Thus, an angry person would be experiencing some particular internal sensation linked with a desire to act in a hostile manner, just as a person who has an itch on his foot experiences a unique desire to scratch the foot.

This view rests, however, on the assumption that each emotion can be identified with a distinct physiological state. Schachter and Singer—on the basis of some evidence that fear and anger, at least, are associated with the *same* physiological state—argued that emotions are a more complex matter. They proposed that the emotions differ from one another not in physiological manifestation but in what the person perceives to be the cause of that physiological arousal. In their view, an angry person and a fearful person experience excitation of the same kind; they differ in that the person experiencing anger perceives the cause of the arousal to be some sort of provocation, while the person experiencing fear perceives the cause of his state to be some sort of danger. Further, people react differently to anger and fear not because they have different internal states (in the way that scratching one's foot follows from a different sensation than the one causing scratching of the hand) but because they have different perceptions about the *cause* of the state. To demonstrate the power of this cognitive aspect of emotion, they conducted a now famous experiment.

Schachter and Singer injected subjects with a drug that produces physiological arousal. Some subjects were told that the drug would have an arousing effect, others were not, and some were told to expect an entirely different side effect. All

subjects were then placed in a situation likely to produce either euphoria or anger. Those who had been deceived about the effect of the drug experienced (as reported by them and as expressed in their behavior) emotion appropriate to the surroundings; those who had been told that the arousal they were experiencing was an effect of the drug did not experience any emotion. Schachter and Singer argued that all subjects acted as if they first noticed that they were aroused; they then searched for the cause of that arousal. Those who hit on the drug as the cause did not experience or report an emotion, since arousal caused by a drug is not an emotion. Those who were unaware of the effect of the drug hit on the situation as the cause, and experienced and expressed the emotion consistent with that attribution. Further results showed that the more aroused the subjects were, the more emotional they became (provided they saw the situation and not the drug as the cause). Thus, physiological arousal heightens an emotional state, but the nature and direction of action are guided by the perception of the cause of the arousal.

Zillmann (1971) pursued this notion by proposing that arousal from an environmental source typically occurs in such a way that we understand its cause; thus, our emotions are usually appropriate to the actual circumstances that cause them. He further argued, however, that attention to a feature of the environment can change very rapidly, while the decay of physiological arousal is a relatively slow process. Thus, arousal from one environmental source can persist after our attention has turned elsewhere. Imagine, then, that you are insulted by someone. The insult will produce arousal; if you were given an opportunity to retaliate, the level of retaliation would be commensurate with your degree of arousal and, presumably, with the nature of the insult. Suppose, however, that—before retaliating—you were to do something *else* that produces arousal; then, at the point of retaliating, you would have difficulty determining how much of your arousal was due to the insult and how much to the other activity. In such circumstances, some of the arousal from the interpolated activity might be transferred, or transformed, into anger, and you might react much more strongly than you normally would to such an insult.

To test this proposition, Zillmann conducted an experiment in which a confederate of the experimenter, in a suitable context, administered electric shocks to subjects. The subjects then saw one of three different types of films: an erotic clip of

tender foreplay, an aggressive film, or an educational film. Pretests indicated that the erotic films produced the greatest arousal, the aggressive material less, and the educational clips virtually none. After watching the clips, subjects were allowed to shock the confederate who had shocked them. Those who saw the erotic clip, as an interpolated activity, shocked the confederate more than those who saw the aggressive clip; those who saw the aggressive clip shocked more than those who saw the neutral clip. Thus, the arousal produced by the interpolated activity was transformed into anger.

Zillmann and his colleagues have extended these findings in several ways. Zillmann, Katcher, and Milavsky (1972) showed that physical exercise, which also produces arousal, intensifies aggression against another if that other has previously instigated an aggressive response. Zillmann, Johnson, and Day (1974) first pretested subjects to determine how quickly they recovered (physiologically) from exercise. They predicted that transfer of aggression would occur to a greater degree in those less fit (slow to recover) than in those more fit (quick to recover), since for the fit the arousal would persist for a relatively brief period of time. They further proposed that excitation transfer would not happen if the chance to retaliate occurred immediately after exercise, since subjects' attention would then be focused on the exercise as the cause of arousal, rather than on the provocation. Therefore, some subjects of each type (very fit, intermediately fit, and least fit) were provoked by a confederate and then were told to exercise. Some were given an opportunity to retaliate immediately after exercising, while others were allowed to retaliate only after first resting for a brief period. Subjects allowed to retaliate immediately after exercising administered no more shock than they did in a pretest, before they were insulted. They apparently attributed all their arousal to the exercise and expressed no anger at all. The amount of shock administered by those allowed to rest after exercising depended on how fit they were; the most fit subjects administered no more shock than they did in the pretest, while those less fit did administer more shock. The less fit subjects were still experiencing arousal from the exercise when they were allowed to retaliate, and this residual arousal was expressed in anger.

Must this residual arousal be present at the time one retaliates? To investigate this question, Zillmann and Bryant (1974) had some subjects thread disks on a wire (nonarousing) while others rode a stationary bicycle (arousing). Two minutes

after these activities (while any arousal produced would still be present, but after its most obvious signs had passed), all subjects were insulted by a confederate. Four minutes after this (when all physiological measures of arousal had returned to baseline levels), subjects were given a socially sanctioned opportunity to retaliate against the confederate. Subjects who had ridden the bicycle administered more shock than did those who threaded disks, suggesting that heightened arousal at the moment of being provoked can intensify subsequent retaliation, even if the retaliation is deferred until the person has "cooled off."

Zillmann, Bryant, Cantor, and Day (1975) investigated the effect of arousal on the processing of information about mitigating circumstances. Subjects in this experiment were all provoked by a confederate. Some were then assigned a strenuous task, while others were assigned a nonstrenuous task. Half of each group were then told of mitigating circumstances affecting the confederate's insulting conduct, while half were not. All subjects were then allowed to retaliate. The nonaroused group retaliated less when there was mitigation for the insult. For the aroused group, however, mitigation had no effect.

Zillmann and Cantor (1976) explored the issue of mitigation and arousal further. Subjects in this experiment were insulted by a rude experimenter. Some subjects were told in advance of a mitigating circumstance; others were told of the mitigation only after being insulted; others were not told at all of the mitigation. Each subject's physiological state was monitored throughout; at the end of the experiment, subjects were given an opportunity to report the rude experimenter to a university committee. This experiment had the following results: The insults of the rude experimenter produced physiological arousal in the subjects who were not told in advance of mitigating circumstances but not in those who knew in advance of the mitigation. Physiological arousal in those told of the mitigation after the fact decayed faster than it did for those not told of mitigating circumstances. This more rapid decay of arousal did not, however, deter the subjects from reporting the experimenter after the experiment. The group not told of the mitigation and the group told after the fact both reported the experimenter more frequently than did the group of subjects told in advance of the mitigation. Consistent with other findings, the amount of arousal present at the time of the insult determined the level of retaliation.

This finding on mitigation is important but must be carefully interpreted. The mitigation in the experiment was that the



rude experimenter had a test coming up shortly and was very worried about it. This mitigation is of the kind that a rational actor may or may not take into account when deciding whether or not to report the experimenter for his rudeness. One might rationally conclude that, exam or no exam, the experimenter should not be rude and therefore should be reported. Or one might decide that being rude when one is worried about something is a forgivable offense, not worth reporting. One interpretation of the results is that subjects forewarned took the second point of view, while those told after the fact took the first. There are some details of the context of an offense, however, which do not admit of two points of view for a rational actor. If someone were to find out, after the fact, that some wrongdoing was the result of an accident (someone slipped, for example), rationality would *require* that this information determine whether the wrongdoer is punished. Details of *this* sort are called excuses or justifications rather than mitigations. The Zillmann and Cantor data suggest that timing about mitigation affects which of two equally rational points of view a person takes; they do not show that people ignore details that a rational actor should take into account.

Although we believe that the research of Zillmann and his colleagues is the most likely among current theories to lead to a clear understanding of the mechanism by which arousal affects the expression of anger, there is one problem with this line of research. That is, it deals only with short-range effects. The kind of arousal produced so far dissipates after only six minutes. Yet we would like to use the model to explain everyday events of a similar sort, for which this time frame is too limited. Imagine that your boss criticizes you unduly; you want to express anger at him or her, but you are afraid of getting fired, so you say nothing. Later you "blow your top" over something minor done by your spouse. This is just the sort of everyday event where one talks of a transfer of emotions: the boss's criticism produced physiological arousal; the minor event was the sort of thing that ordinarily produces only slight arousal and, hence, a mild reaction. In this case the anger is excessive, and we want to explain it by saying that the anger expressed is a result not only of the spouse's minor infraction but also of the residual effects of the first incident. The problem with this is that arousal from the first incident will have been dissipated by the time of the second. How might the model be extended to cover such everyday cases?

One possibility is that extreme arousal, especially if no

action is taken at the time, has two effects. One is a short-term physiological arousal, but such experiences—perhaps by releasing substances that affect the reactivity of the central nervous system—may dispose people to become aroused more easily when provoked for a longer period of time. Another possibility is that, in cases of the sort we outlined, people dwell on the incident and thus continuously restimulate themselves, so that the temporal duration of the arousal is extended. A third possibility is that the level of hostility or anger depends not only on the amount of physiological arousal but also on other kinds of disturbances—such as disturbances in concentration and attention. The precise physiological and cognitive mechanisms involved in anger are, and will continue to be, focal points of research on aggression.

### Catharsis

One consequence of the Freudian view that frustration builds up aggressive energy was a corresponding view that this aggressive energy can be drained off. This simple metaphor has stimulated a good deal of research under the rubric of catharsis. The basic conception of catharsis, at least as experimental psychologists have used it, is that exposure to symbolic enactments of aggressive acts allows the individual to participate vicariously and thereby drain off excess aggressive energy.

Laboratory results on this possibility are conflicting. Berkowitz (1962) has argued that seeing the enactment of aggression may call forth aggression rather than drain it off. He proposes that any stimulus which has been associated in the past with incidents of aggression will lead people to engage in aggression. To test this assumption, Berkowitz and Rawlings (1963) showed some subjects, who had been insulted by a confederate, a film clip from *Champion*, in which Kirk Douglas is savagely beaten in a prizefight. Some of the subjects were told that Douglas deserved the beating; others were told that it was unjustified. Those who witnessed the justified beating (which presumably should have been cathartic) evaluated the confederate more negatively than did those who saw what they were told was an unjustified beating. Berkowitz (1965b) obtained a similar effect when half of the subjects saw a neutral film clip and half saw the beating. Those who saw the beating were more hostile than those who saw the neutral clip. In a similar experiment, Geen and Berkowitz (1966) found the highest levels of

aggression when the confederate had the same name as the character in the movie.

In a similar vein, Berkowitz has tried to show that the mere presence of weapons, stimuli associated with aggression, can intensify the amount of aggression people commit. Berkowitz and Le Page (1967) created a socially acceptable context for subjects to shock a confederate. They placed a rifle and a revolver—which, they claimed, belonged to the confederate—next to a shock machine. In other conditions the rifle and revolver did not appear to belong to the victim but merely served as part of the decor of the laboratory. There were two other conditions: in one there was a badminton racket next to the machine; in the other the space was left empty. (That a subject might be puzzled by guns strewn around a laboratory—especially ones casually dropped by a coparticipant in the experiment—does not seem to strike Berkowitz as a problem in his research design. We shall merely report the results.) It was found that the presence of weapons intensified the amount of shock delivered to the victim, especially when the weapons appeared to belong to the victim. Similar subsequent research has sometimes found such an effect and sometimes has not found it. Turner and Simons (1974) have shown that subjects who thought their “adjustment” was being tested delivered less rather than more shock in the presence of weapons. Further, when a confederate told the subjects that the experimenter was probably interested in how the weapons would affect their hostility, aggression declined below the level observed without the weapons’ presence. Presumably, subjects assumed that it was better to appear unaffected by the presence of the weapons than to appear to be made more hostile by them.

The effect of the presence of weapons on level of aggression is still not settled; whatever effect the weapons have, however, is not simply due to the fact that weapons have been associated with aggression in the past but depends very sensitively on what the presence of the weapons means about the nature of the current context and what the weapons imply about the aims or intentions of those who are running the experiment and who, thus, define acceptable behavior. Berkowitz (1974) has recognized this point. His most current position is that the stimulus or cue which causes aggression is *not* the physical object, the weapon per se, but what the subject thinks the presence of the weapons means about the point of view of the experimenter; thus, if there are things in the laboratory that lead the subject

to believe he should be hostile, then he will become more aggressive.

In contrast to Berkowitz's view, and in support of the notion of catharsis, Feshbach (1955) found that subjects who were insulted and then allowed to fantasize to some TAT pictures (a form of vicarious hostility) liked participating in the experiment better than those who were not given a chance to fantasize; in addition, those who were allowed to fantasize were slightly less ill disposed toward the experimenter. Further, there was a significant relation between the amount of hostility expressed in the fantasy stories and the amount of hostility expressed toward the experimenter, with greater levels of fantasy hostility associated with lower levels of hostility toward the experimenter. In a similar experiment, where subjects were insulted and then told to write fantasies or to daydream, Pytkowicz, Wagner, and Sarason (1967) found that the fantasizing reduced hostility only in male subjects who reported that they frequently daydreamed; this effect did not occur with female subjects or with male subjects who were unused to daydreaming.

How do we account for the discrepancy between studies that show people aggressive films and find enhanced aggression and studies that, on occasion, find reduced aggression after vicarious anger in the form of fantasies? One explanation, perhaps, is that the subjects permitted to fantasize are more than passive witnesses; they actively create the aggressive stories. Perhaps it is this active elaboration, at least for some males, that produces the reduction in aggression.

Research has been conducted to investigate specific activities proposed as effective vehicles for the catharsis of aggression. Freud (1905a) proposed humor as one way in which people can sublimate (express in socially acceptable form) aggressive desires. Singer (1968) found that moderately angry subjects became less angry after listening to humorous tapes, whether the tapes had aggressive content or not, but that very angry subjects became less angry only when listening to aggressive humor directed at the group that they were angry at. He also found a strong positive relation between appreciation of the humor and a lack of subsequent hostility toward the target group. The relation between hostility reduction and listening to humorous tapes has not always shown up in experimental data. Berkowitz (1970a), for example, found no such reduction of hostility.

Another traditional recommendation for the reduction of hostility is competitive sports. Lorenz (1966), for example, enthusiastically endorses sports as a solution to international hostility. Some empirical research, however, shows that participating in sports can increase rather than decrease aggression. Patterson (1974), for example, found that football players show an increase on hostility tests after the season, when compared with preseason measures. Hornberger (1959) found that subjects who pounded nails for ten minutes became more hostile rather than less hostile.

The conflicting state of the data on catharsis probably results from the fact that it is a simple metaphor of aggression. The idea that aggression can be built up and then drained off does not do justice to the complexities of aggression, frustration, or catharsis. This does not mean that the notion of catharsis is valueless; in fact, a much more subtle view has been proposed. In his *Poetics* Aristotle pointed out that a dramatic presentation allows the audience to experience vicariously the emotions expressed by the hero. Such vicarious experience, then, provides an opportunity for the education of the audience's emotions.\* As we have already seen, emotions involve an understanding of the situation (Peters, 1962; Schachter and Singer, 1962). Understandings can be educated and made more complete, more mature, and more in line with one's moral and aesthetic judgments.

### Modeling

Another research tradition, also concerned with the effects of witnessing aggression, has argued that dramatized aggression teaches people how to aggress. Although it is not clear how this view differs from the commonsense view that people sometimes learn by observing others, it represents a very active research area.

This vicarious learning of aggression has been amply explored by Bandura and his colleagues. Bandura, Ross, and Ross (1963a), for example, found that children who witnessed a live, filmed, or cartoon character attack a "bobo" doll in an unusual way were likely to imitate the model, beating up the bobo doll themselves. The model taught the children how to hit the bobo

\*I would like to thank Stuart Albert for calling this interpretation of the Aristotelian concept to my attention.

doll. Of course, what we call aggression seems somehow different from beating up a doll (one constructed just to be attacked), but Bandura has argued that aggression is a learned response and that one way of learning how to respond aggressively is to watch others do it. More important, someone who watches others aggress may also come to believe that it is acceptable to aggress. Wheeler and Caggiula (1966) and Wheeler and Smith (1967) have compiled some data in this direction. Drabman and Thomas (1974) have shown that children grow more tolerant of aggression after watching filmed aggression.

Bandura and his colleagues are surely right when they say that the forms of aggressive behavior must be learned. No one springs into the world knowing how to use guns, knives, or even wit. We would also probably agree that people are more likely to engage in aggression if they believe that it is called for in a particular context. One way to decide what is appropriate is to watch what other people, in the same situation, do. (Various studies of conformity—for instance, Asch, 1952, and Latané and Darley, 1968—compellingly address this point, especially in its more problematic aspects.) Furthermore, the issue of appropriateness often hinges on a matter of degree. Cultural norms do not absolutely forbid anger, hostility, or even physical attack; they proscribe *excessive* anger, hostility, and abuse. (Someone, for example, who does not respond at all to an obvious insult is hardly a cultural hero; he or she is a Milquetoast, a doormat.) Every individual and every community face the problem of determining in concrete instances how much hostility is reasonable, and what levels are excessive. The mere sight of another person engaging in extreme levels of hostility—or even the awareness that others do so—may shift the line between the normal and the pathological.

An illustration of this point is a study by Harrison and Pepitone (1972). They have shown that the knowledge that extreme degrees of violence are available can decrease subjects' inhibitions about inflicting pain. They told subjects to shock rats as part of an experiment on learning. Subjects were told that they were to use only certain levels of shock on the shock machine. Some subjects were told that the levers they could *not* use administered *much* higher levels of shock than the levers they could use. Other subjects were told that the forbidden levers delivered only moderately higher shock than the levers they could use. Subjects in the first group used higher levels within the permitted range than those told that the forbidden

range was only moderately higher than the allowed range. Perhaps, then, exposure to repeated dramatizations of excessive violence has its most subtle and important effect by changing people's conceptions of what is excessive.

### Institutional Aggression

Thus far, we have treated aggression as if it were always the consequence of individual motivation—the desire to reach some goal, if aggression is instrumental, or to retaliate against an insult or a moral transgression. Not all acts of aggression are committed while the aggressor is angry, nor can all be best explained as attempts to advance one person's interests by injury to another. Clearly, in the twentieth century the most common, dangerous, horrifying, and difficult-to-explain acts of aggression are not those of a lone individual against another after being provoked; when these acts do occur, we understand them, to some degree, without help. What is less easy to understand is aggression on a massive scale in the context of modern warfare. Students of aggression must address themselves to the more difficult question of how, for example, Germany, perhaps the most culturally advanced nation in the history of the West, could be brought to the point of attempting genocide; how the thousands of people necessary for such an endeavor could be organized and controlled in an activity so patently in violation of the dictates of common conscience. Research on aggression, if it is to make a contribution, must surely come to terms with the aggression of Nazi Germany or My Lai.

One view of such horror, advanced by Freud (1933a), is that it is a manifestation of a universal death instinct. This instinct is initially turned inward, toward destruction of the self; when in conflict with Eros, however, it is turned outward onto others. This explanation is appealing in certain ways—primarily because it gives a profound answer to the profound question of evil. But we must ask whether all action, especially such patently evil action, necessarily flows from the desires of the individuals who perform them? Can other models, which do not posit such universal mysterious instincts, be advanced to explain what is so obviously a collective phenomenon?

Arendt (1963) addressed this problem in *Eichmann in Jerusalem*, subtitled *A Report on the Banality of Evil*. In her view, the evil workings of the Nazi death machine cannot be explained as merely the consequence of some Titanic force that

desired to spread suffering, death, and destruction; it was, in fact, a banal and simple consequence of thousands, perhaps millions, of ordinary citizens' doing their jobs with utter disregard for the content of those jobs. Paradoxically, it was the consequence of an overdeveloped sense of duty and loyalty to authority: "Evil in the Third Reich had lost the quality by which most people recognize it—the quality of temptation. Many Germans and many Nazis, probably an overwhelming majority of them, must have been tempted *not* to murder, *not* to rob, *not* to let their neighbors go off to their doom (for that the Jews were transported to their doom they knew, of course, even though many of them may not have known the gruesome details), and *not* to become accomplices in all these crimes by benefiting from them. But, God knows, they had learned how to resist temptation" (p. 150).

But can people, simply on instructions from an authority, really be brought to the point of torture and murder? In a remarkable series of studies, Milgram (1974) brought this phenomenon under experimental investigation. To explore this question, subjects (a cross section of the New Haven population, including white-collar workers, blue-collar workers, and professionals) were recruited for a psychology experiment at Yale University. When the subjects arrived for the experiment, they met an experimenter and another subject, a middle-aged, friendly, avuncular man (actually a confederate of the experimenter). Each subject was told that he and the confederate were to take part in an experiment on punishment and learning. One was to be the teacher; the other, the learner. Through a rigged drawing, the subject was always assigned the role of teacher. The subject was also told that the punishment would be delivered in the form of electric shock and that the shocks would be painful but would not cause permanent tissue damage. He then saw the confederate strapped in a chair and hooked up to electrodes, and he knew that the confederate could not leave the chair, or the experiment, once the procedure had begun.

The subject was then shown the "shock machine," a professional-looking device with a series of thirty levers marked from 15 to 450 volts in steps of 15 volts. The levers also had verbal designations beneath them, ranging from MILD to MODERATE, then SEVERE to DANGER, and finally XX. To lend authenticity to the procedure, the subject was given a sample shock of 45 volts. The maximum shock the machine could deliver was, then, ten times that which the subject received. Subjects were told that the learner was to be given a shock each



time he made an error and that with each error the shock was to be increased one level, starting from the mildest, 15 volts. The learner gave a predetermined schedule of correct and incorrect answers.

Milgram expected few subjects to participate very far; most of them, he believed, would simply refuse to continue. To his surprise and shock, in the pilot study no one broke off. He therefore altered the procedure—putting further pressure on the subjects to disobey by providing feedback from the learner in the form of tape-recorded protests and screams in pain. Up to 75 volts the learner gave no indication of discomfort. At 75 volts he grunted. At 120 volts the learner screamed that the shocks were becoming very painful. At 150 volts he implored, “Experimenter, get me out of here! I won’t be in the experiment any more! I refuse to go on!” The intensity of his agonized screams increased up to 300 volts, at which point he refused to participate any further. From this point on, the learner gave no further answers, no further indications that he was still conscious or alive (p. 23).

Milgram solicited opinions from psychiatrists and laymen about the percentage of subjects that would continue in the experiment to the 450-volt level. The average opinion was that .1 percent would continue to obey. This impression—presumably based on the assumption that such behavior must flow from inner dispositions, motives, or needs and that only a very small segment of the population, sadists, was sufficiently deranged—was sadly, and naively, quite wrong. In fact, twenty-six out of forty subjects (60 percent) continued to the end. It is important to keep in mind that this level of shock far exceeds the levels of shock typically found in experiments on aggression, where that aggression, although similarly placed in a justificatory context, is a consequence of individual anger. Aggression as an outgrowth of anger is inhibited, in most of us, by conscience. Aggression commanded by authority is sponsored by our loyalty, duty, and, most paradoxically, conscience.

Many subjects protested the experimenter’s orders to go on. When subjects refused to continue, the experimenter responded with a fixed series of prods. To the first protest the experimenter replied, “Please continue”; to a second he replied, “The experiment requires that you continue”; then, if necessary, “It is absolutely essential that you continue”; and, finally, “You have no other choice; you *must* go on.” If the subject persisted in offering more than four protests, the experimenter

terminated the experiment, and the subject was counted as disobedient.

Although many subjects protested the experimenter's commands, relatively few disobeyed. The protests did, however, have an effect. They showed clearly to the victim, the experimenter, and themselves that the subjects did not *want* to go on. The sincere dramatization of lack of desire, although useful to calm a disturbed conscience, was of little use to the learner. The rejoinders from the experimenter further served to disarm conscience. They were all couched in impersonal terms. Each prod showed that the subject's continued obedience was not a product of his desire, the experimenter's desire, or the desire of any concrete individual; continued obedience was demanded by a larger institutional entity, the experiment.

Several details of the experimental procedure seem important in understanding subjects' obedience. First of all, the subjects were gradually induced to violate their conscience. They were asked at first to deliver only a minor, reasonable shock. The progression to extreme levels was slow and inexorable, making it difficult to determine exactly where the line between a reasonable experimental procedure and torture should be drawn. Second, the complexity of the task, especially at first, seemed to screen subjects from a full realization of where the experiment might lead. Finally, the experimenter explicitly told subjects, if they asked, that he accepted full responsibility for anything that might happen to the learner. The willingness to discharge responsibility onto malevolent authority is apparently not an idiosyncratic aberration of an Eichmann but is a common human failing.

Subjects did respond to a moral requirement, but that requirement was to the immediate, present experimenter, not to the more distant learner. Milgram systematically varied this last influence by moving the subject closer to the learner. In some conditions the learner was in the same room as the subject, so that the subject could see as well as hear his pain. In another condition the subject had to hold the learner's hand on the shock plate to deliver the shocks. As the learner became closer, the number of subjects who disobeyed increased. In the condition where the subject had to actually restrain the learner, the obedience rate was 30 percent. In a condition where the experimenter was removed from the room with the subject, delivering his instructions by telephone, the rate of obedience was substantially reduced. Further, some subjects in this condition

cheated by reporting to the experimenter that they were delivering the required levels of shock while actually delivering lesser amounts. It was, at least partially, the difficulties of face-to-face confrontation with the experimenter that made disobedience so difficult. This difficulty of face-to-face confrontation is highlighted by the fact that even those subjects who disobeyed remained polite and respectful. They were, by and large, passively disobedient rather than actively hostile.

Milgram has reported a series of more than twenty-five variations on the original experiment, designed to explore the forces that constrained subjects to continue to obey. We cannot review all these findings in the space available; we can mention only some important variants: (1) Women obeyed at exactly the same rate as men. (2) One reason for subjects' continued obedience might have been the fact that the experiment was carried out at Yale, a prestigious institution. Therefore, Milgram repeated the experiment in a somewhat run-down office building in the heart of New Haven, under the auspices of a fictitious commercial research organization. The rate of obedience was not significantly reduced. (3) One reason that subjects offered for continuing the experiment was that the experiment was "fair." Both the subject and confederate entered the experiment of their own volition, and the assignment to role was, apparently, done by chance. Thus, both subject and confederate had an implicit contract with the experimenter to continue. To alter this "fairness" of the experiment, Milgram changed the procedure. When the subject and confederate entered the laboratory, each was asked to sign a standard form consenting to take part in the research. The confederate told the experimenter, loud enough for the subject to hear, that he had a heart condition and that he was willing to participate only if the experimenter would stop the experiment when he (the confederate) demanded. The experimenter grunted in agreement. Even in this condition, the experimenter's demands that the subjects continue overpowered the confederate's demands that he be released. The rate of obedience was not significantly reduced.

The Milgram experiments demonstrate in a dramatic way the power to produce aggression inherent in the fact that people enter hierarchically organized institutions. If we must understand aggression produced by anger, it is much more important to understand the aggression of people with no desire to harm anyone.

Zimbardo (1973) has investigated aggression in a differ-

ent institutional setting—prisons. To observe and investigate this form of aggression, he constructed a mock prison in the basement of Stanford University. The prison was constructed with the aid of ex-inmates, to capture the essence of a real prison environment. The subjects for his experiment were all college-age males recruited by an ad in a local newspaper. All were white and middle class and showed themselves to be psychologically normal on standard tests of pathology. For what was to be a two-week experiment, half of the subjects were randomly assigned the role of guard, and half were assigned the role of prisoner. The “prisoners” were “arrested” in the middle of the night in actual police cars and driven to the prison, where they were stripped, deloused, deprived of their personal effects, and read the rules of the institution. Each was assigned a number and a cot in a small, crowded cell. Guards were assigned uniforms and nightsticks and were always addressed as Mr. Corrections Officer.

The details of the prison life were designed to dehumanize and depersonalize guards and prisoners in the way that real prisons do. Zimbardo wished to show that, under such conditions, brutality on the part of guards and apathy and withdrawal on the part of prisoners would occur, even though the prisoners were not criminals and the guards not really guards, and even though each group of subjects knew that the other subjects were fellow college students.

His experiment worked well—indeed, too well. Because of the guards’ increasing hostility toward the prisoners, and the signs of psychopathology in the prisoners, Zimbardo was forced to abandon the experiment after only six days. Zimbardo himself, as prison superintendent, found it difficult to separate his identity from that of the role he was playing. Whether or not this sort of brutality is a *necessary* consequence of prison life, the Zimbardo illustration shows in a dramatic way that features of prison life *can* generate extreme levels of hostility, even when the inmates are not hardened criminals or troublemakers and the guards are not self-selected for their roles by sadistic desire.

This brutality was not a consequence, simply, of subjects’ adopting an attitude consistent with their new roles but was supported by concrete aspects of the mock prison. The dehumanization of the prisoners was fostered in a number of ways. First, they were severed from the objects that usually reinforced their identity—girl friends and relatives and other outside roles. They were also required to wear stocking caps, to

disguise any individuality in hair style, and were addressed by number, not by name. The male prisoners wore hospital gowns, forcing them to walk and sit modestly—a behavior that prisoners and guards identified as feminine. Finally, the prisoners had the most minor control over their behavior taken from them. They were required, for example, to ask permission to use the bathroom; if the guards refused permission, the prisoners were forced to use a communal bucket in their cells. These forms of degradation produced regression on the part of prisoners and made it easy for the guards to treat them as less than human. A lesson to be learned from the Zimbardo experiment is that, although morality demands that we treat others humanely, no matter what they do, our ability to elicit humane treatment from others is a continuing accomplishment, contingent on our ability to present ourselves as human.

A further characteristic of the Zimbardo simulation should be stressed. The brutality emerged over the course of the experience; it grew worse as the study continued. Guards drifted into immorality. Part of the cause of this drift may have been the continued silence of those guards who abhorred the brutality they saw their colleagues committing. Zimbardo reports that some of his guards were “good guards,” who were troubled by what they saw others do and who tried, themselves, to treat the prisoners kindly. But none of these good guards reproached a colleague for his misbehavior. Sabini and Silver (1977) have argued that social norms emerge when group members confront others about specific instances of misbehavior. When those privately troubled by the misbehavior of others remain silent, such common, shared norms do not emerge. Conscience is anchored by objective, shared sentiment. This common sentiment emerges when individuals overcome the inhibitions that people feel about reproaching each other morally.

### Conclusion

When we first approached the problem of aggression, it seemed deep and intrapsychic. A close review of the literature, however, shows that aggression is most typically an instrumental act, designed to reach some goal; or a response to the lowered esteem occasioned by an insult; or a response to violated community standards—all of which seem to be neither deep nor intrapsychic nor difficult to understand. Another large class of

violent acts are those committed within an institutional framework—a product of a collectivity, not an individual psyche. The question for continued research is: Why are violent means chosen in a given instance where other means are possible to reach valued ends, restore individual honor, or redress transgressions of moral rules?



# *Part IV*



How should the perpetrators of violence be handled in the courts and in treatment, and how can society deal with and prevent violence? These questions are discussed in this section.

Karl Menninger in a conversation (Hall, 1969) stated, "My idea of a prison is a place where people who can't make it on the outside are detained and rehabilitated . . . really rehabilitated. . . . Prison shouldn't be a place where men are merely broken, embittered, and dehumanized. Being criminal to a criminal is still a crime." The issue of treatment versus correction is discussed in this section by Seymour Halleck, a man whom Menninger regards as a foremost expert on this subject.

Halleck focuses on what is being done, can be done, and should be done with the violent offender. He describes the conventional goals of correctional justice as techniques to incapacitate, to deter, to impose retribution, and to rehabilitate. He out-



# *Disposition, Treatment, and Prevention*



lines three views of rehabilitation: preventing recidivism by any means; preventing recidivism while guarding the welfare of the offender; and, finally, trying to prevent recidivism while also making the offender a good citizen. This third view of rehabilitation is most difficult when there is an emphasis on deterrence and retribution. Halleck goes on to present a case for rehabilitation, elaborating on these key points: (1) Rehabilitation has not been proved ineffective. (2) Deterrence and rehabilitation can be compatible. (3) Length of incarceration should not be affected by length of rehabilitation. (4) Humane people naturally try to rehabilitate others. (5) Rehabilitation is economical. He also highlights the "inherent moral rightness" of rehabilitation. In the remainder of the chapter, Halleck describes rehabilitation settings, approaches, and problems confronted in rehabilitating offenders. He also deals with difficulties in deciding on release

dates and trying to predict potentiality for future violence, as well as the effects of rehabilitation services following release in diminishing the risk of recidivism. He closes by posing a provocative ethical question: How far is society entitled to go in changing the offender psychologically and physiologically in the name of rehabilitation?

Two of the editors, I. L. Kutash and Schlesinger (1977), after examining court cases in which they participated, concluded that many individuals who should be in treatment facilities are languishing in correctional institutions, which will not benefit them in the least, because attorneys did not recognize the possibility of mental disorder and the need for professional assessment. What occurs and what should occur in the adversary process is the topic of the second chapter in this section. Michael Perlin and Robert L. Sadoff describe the role of the psychiatrist in courtroom proceedings. In their view, the legal and psychiatric professions must collaborate, so that motives, intent, and drives can be examined within the context of rights, obligations, duties, and social order. If rehabilitation is attempted, and if the courts, through the utilization of mental health professionals as expert witnesses, arrive at proper disposition, treatment of the violent and sexual offender can be undertaken. (If successful, treatment is itself a form of prevention of violence as well.)

The critical issue of treating the violent offender is discussed by Denis Madden and John Lion, who founded one of the pioneer programs for treatment of the violent offender. They cover emergency treatment of the offender, the key role of the psychosocial history and how to obtain a pertinent one, and the important therapeutic issues in the treatment process. They consider the most central issue to be that of control. Other issues covered are hypervigilance, distrust, communication problems, consciousness of consequence of actions, and anger and whom it is directed toward. They describe such modalities of treatment as the individual approach, the group approach, medication, and surgical procedures. They see all therapies with violent offenders as having the chief goal of effectively controlling aggression for personal and social usefulness.

William Reevy assesses comprehensively the leading treatment programs for sexual offenders. He highlights the use of the group modality with these individuals and concludes his chapter by expressing views based on his own vast experience. He de-

scribes several phases in the group process with the sexual offender and sees as critical the working through of the offender's distrust and anger, beginning with anger toward legal authorities, local administrators, classification team members, and the leader and then focusing on parents, siblings, wife, or girl friend. He outlines as the next phase working with the offender's anger toward himself and his lack of capacity to direct his life. The third phase of treatment involves helping the offender analyze his offense and its derivatives. In Reevy's view, the ultimate goal is to help the offender obtain the skills for living as a non-offender.

In Chapter Twenty-Three Harvey Schlossberg draws on his experience with the New York City Police Department to describe methods found effective in treating the violent law enforcement officer. He applied group principles and social learning to produce long-lasting gains and advocates this approach as most effective in relieving immediate pressures for dealing with acting-out situations.

Society has been criticized for its great expenditures of time and energy in rehabilitating offenders while ignoring the victims, who may also require rehabilitation and treatment. In Chapter Twenty-Four Irwin L. Kutash advocates the systematic study of victimology and puts forward a vocabulary, a classification system, and a treatment plan for victims of violent crimes. The system incorporates the finding that some victims help to precipitate the attack on themselves. Treatment approaches for all categories of victims are presented, including two modified psychoanalytically oriented psychotherapies designed by the author to treat victims. One approach, "SAVE Therapy," is designed to treat victims of attacks or situations that were beyond their control. The second approach, "PAVE Therapy," is intended for victims who promote their own attack. Dr. Kutash has utilized these new approaches with concentration camp survivors, rape victims, battered wives and children, and victims of violent crimes.

The National Commission on the Causes and Prevention of Violence (1969b) came to this conclusion: "Violence has usually been the lava flowing from the top of a volcano, fed by deeper fires of social dislocation and injustice; it has not been stopped solely by capping the top, but has usually subsided when our political and social institutions have managed to make the adjustments necessary to cool the fires below." Society's role in prevention is dealt with in this section by Sandra Haber

and Bernard Seidenberg and by Benjamin Wolman. Drs. Haber and Seidenberg demonstrate that an act is defined as violent when it is not socially tolerable. One could say that violence is in the eye of the societal beholder. They then deal with other factors (specifically, the agent of the act, the victim, the situation, and the degree of harm) which determine whether an action is defined as violent. They indicate that society has come to accept some forms of action as violent (for instance, rape, child abuse, and wife abuse), although these acts once were not recognized as such. After showing how these events shift from the private domain, where they may be tolerated, to the public domain, where legislation and enforcement occur, the authors move on to what they consider "true control." True control prevails when the act is perceived uniformly and the assailants are not only censored but also brought under legal control through a responsive legal system, effective enforcement, and focus on the victim rather than the assailant.

Perhaps more important than any other topic is that of prevention of violence; for, if violence is successfully prevented, treatment and disposition diminish in importance. Some of the factors cited most often as causes of violence over and above any innate aggressive drives in people are poverty, boredom, frustration, violence in the media, racial or religious bias, and fulfilling machismo expectations. Some of the solutions include correcting social causes, reestablishing religious and moral values, and returning to closely knit families and community ties. Benjamin Wolman focuses on education of the child and parental responsibility in this regard. Overwhelming force is a short-range method of preventing violence, but education is the long-range approach that prevents not only a particular act of violence but its recurrence. The key, in his view, is the parental role. He concludes that the job of prevention is not up to police, psychologists, or educators; instead, it requires the cooperation of the entire society in the educating of its young.

# Violence: Treatment Versus Correction

*Seymour L. Halleck*



This chapter focuses on what is being done, what can be done, and what should be done with the individual who has already committed a violent act. As a rule, such an individual has already been tried and convicted under the criminal law, but under certain circumstances offenders who have probably been violent but who have never been found guilty of committing a crime are also subjected to legal restraint. The great majority of violent offenders are confined for relatively lengthy periods of time in closed institutions. Here a variety of efforts are made to change their behavior. Sometimes these efforts are referred to as treatment, and sometimes they are referred to as correction.

It is difficult to precisely define terms such as *treatment* or *correction*. More often than not, treatment and correction serve similar rather than antagonistic goals. When we correct a person's behavior or change his behavior in order to help him,

we are in a very real sense treating or helping him. Unfortunately, the term *treatment*, as applied to offenders, is likely to evoke an image of a purely medical approach, and the term *correction* is likely to be associated with a punitive approach. In reality, there is no purely medical or completely corrective approach to violent offenders. Rather, in most dispositional approaches to the violent offender, medical, behavioral, economic, and punitive models are intertwined in a very complex manner.

It is far more useful, then, to consider the issue of "what should be done with the violent offender" from the standpoint of the conventional goals of correctional justice. In dealing with known offenders, the law is designed to serve four major purposes: to incapacitate, to deter, to impose retribution, and to rehabilitate. A discussion of these four goals will provide a realistic view of our choices in dealing with the violent offender.

There are times when we believe that a violent individual will continue to hurt others unless he is put into an environment where he is controlled. That individual must be incapacitated—usually by confinement in a prison or a secure hospital—so that he cannot victimize innocent citizens. Incapacitation is a goal of the criminal law which primarily serves the public. It does not serve the individual offender except insofar as it prevents him from committing acts that may lead to his being restricted in even more powerful ways in the future.

A perplexing issue in using incapacitation with violent offenders is determining the extent or length of incapacitation. The surest way to incapacitate offenders is to execute them. Since, in most instances, our society rejects this solution, we must develop some criteria for determining when an offender no longer presents a substantial threat to other citizens. In this area, we have precious little science to guide us (Monahan, 1974; Stone, 1975). The best we can do is make predictions about the probability of an individual's committing another violent act if incapacitation is removed. As will be elaborated in more detail later, even our ability to make accurate statements about an individual's potentiality for violence is limited.

A second function of the criminal law in dealing with offenders is deterrence. If we do things to an offender that he experiences as unpleasant, he may be deterred from committing offenses in the future (this is called specific deterrence). Other citizens who might have been tempted to commit a similar crime will also be deterred by witnessing an example of what

might happen to them if they violated the law (this is called general deterrence). All of this has an inherent logic and appeals to our common sense. Yet there is much controversy in the field of criminal justice as to the value of punishment as deterrence. In recent years economists and sociologists have promulgated a theory of crime in which offenders are considered to be rational people who regularly weigh the risks and benefits involved in committing an antisocial act. In this view, potential offenders will be deterred from committing crimes if they are reasonably sure of a punitive response from society. Deterrence theory is frequently invoked to justify the imposition of punitive sanctions, such as imprisonment, against the offender (Sullivan, 1973; Tittle and Logan, 1973).

The actual data on the effectiveness of imprisonment as a deterrent are far from conclusive. Certainly, the high rates of recidivism following imprisonment in our country indicate that imprisonment is not effective in diminishing the future criminality of many offenders who are subjected to this sanction. The data on general deterrence offer a little more cause for optimism. By comparing crime rates with the number of convictions and prison sentences in a given area, criminologists have been able to determine that *certainty of punishment* diminishes crime rates. They have also noted that *speed of punishment* diminishes crime. There is, however, great uncertainty whether *severity of punishment* has any deterrent effect. Nonetheless, many states in this country are now imposing fixed and long sentences upon violent offenders; some have restored the death penalty for certain crimes, and others are considering such action. These practices are not logically supported by deterrence theory. Some data indicate that the crime of homicide may be deterred by long sentences, but even these data have been seriously questioned (Smith, 1977); and there is no proof that the death penalty deters the crime of homicide. At the same time, there is little evidence that increasing the length of imprisonment deters other offenders. It is certainty and celerity of punishment—not severity of punishment—that deters. The possibility of severe sanctions also diminishes the certainty that any sanctions will ever be imposed. In the crime of rape, for example, the possibility of severe sentences frequently leads to the offender's being given the benefit of the doubt and enables him to avoid conviction and imprisonment. Certainty of punishment is then diminished. The misuse of deterrence theory to justify imposition of lengthy sentences upon offenders has also

resulted in a massive and economically unfeasible overcrowding of our prisons.

A third goal of the criminal law in dealing with violent offenders is retribution. Society has a right to punish those who transgress against it. The imposition of legal sanctions, in the form of imprisonment or execution, confirms the moral codes of society and serves to prevent acts of private vengeance. If the society, under a rule of law, did not punish, private citizens would respond to acts of criminal violence by retaliatory acts of violence, and we would live in a lawless society. Those who worry about the courts' being "soft" on criminals sometimes fear that too much leniency will make law-abiding citizens resort to a vigilante form of justice. Their fears are not entirely unfounded.

Retribution or simple punishment is a legitimate goal of the criminal justice system. The problem with this goal is that it is always extremely difficult to decide how much retribution is just and socially useful. It is expensive to incarcerate offenders; and, certainly, when an individual is no longer violent and will not be a risk to others, society loses a great deal by confining that person to prison. Too much emphasis on retribution also may interfere with the fourth goal of the criminal justice system, rehabilitation.

If violent offenders are not to be executed or deported (an unlikely disposition in these days), it is both economical and humane to return them to a free society as soon as they are no longer dangerous. Although some violent offenders may cease to be dangerous almost immediately after they have committed a violent act, we have to assume that most of them will retain a propensity toward violence unless something is done to change them. When we try to change offenders so that they will behave in a manner that we believe is good for the rest of society, we are attempting to rehabilitate them. The term *rehabilitation* is similar to, but not identical with, the term *treatment*.

Rehabilitation is not a simple concept. When considered in terms of goals, it can be viewed in several ways. One view of rehabilitation is that it simply involves changing some aspect of the offender so that he will be less likely to commit antisocial acts. With this goal rehabilitation is equivalent to diminishing recidivism. An individual may be considered rehabilitated, then, when he loses his motivation to be violent, develops a more benevolent attitude toward society, learns new skills that give him greater psychological and social strengths, or develops reli-



gious or moral beliefs that help him control violence. But if we are concerned only with the absence of recidivism, we can also argue that the prisoner who is lobotomized, castrated, or subjected to some form of psychological mutilation has also been rehabilitated. When we think of rehabilitation only as change which diminishes recidivism, there are a large variety of actions we can take to change violent offenders—some of them consistent with the ethical precepts of a humane society, and some of them not.

A second way of viewing rehabilitation as a goal takes these ethical precepts into account. That is, the offender is to be changed so as to diminish his recidivism, but such change must not compromise his future physical and psychological potentialities. Under this definition of rehabilitation, drastic physical treatment—such as psychosurgery and castration, as well as certain forms of drug and behavior therapy—might be excluded. Given the current value system of American society, most of our current efforts at rehabilitation are directed toward this second definition. We try to change offenders in ways that will diminish recidivism but will not drastically diminish the offender's future potentialities.

A third and more lofty goal of rehabilitation is to change the offender so that his criminalistic tendencies are eliminated and he also becomes a better citizen. Here the goal is not only to stop recidivism without damaging the offender but also to do something to make the offender a more effective and even happier citizen. Unlike the second goal of rehabilitation, which does not take cognizance of the offender's need for effectiveness or happiness, this third possible goal leads to concern with the offender's personal needs. Rehabilitation under the second goal is good for society but may not necessarily be good for the offender. Rehabilitation under the third goal is good for both the offender and society.

It is important to keep the above three concepts of rehabilitation in mind when we talk about violent offenders. Those who deal with correctional justice often discuss rehabilitation as though it were a unitary concept. Yet each individual in a given dialogue may have a quite different notion of rehabilitation. When we are motivated by punitive and economic values, we talk about rehabilitation solely in terms of diminishing recidivism without too much regard for the offender's well-being. When we pay attention to ethical considerations, we are concerned that rehabilitation not be so drastic that it hurts the

offender. When we view the offender more humanistically, we wish not only to stop him from being violent but also to help him improve his life.

Some of the goals involved in changing offenders may have little or nothing to do with rehabilitation. More specifically, many of the services offered to offenders can be viewed as treatments that are helpful to them but will not influence the probability of their recidivating. (For our purposes here, I will define *treatment* as anything that is done to change an offender in a way that will benefit him or benefit society. The term *treatment*, then, covers all aspects of rehabilitation, but it also encompasses something more.) For instance, many individuals in our prisons are mentally ill. Some suffer greatly from the stresses of incarceration and from personal problems which have little to do with their criminality. Psychotherapists and psychiatrists may try to help offenders with these problems, just as they would help any other citizen. Such treatment, however, may not help society.

Still other goals of the correctional system may actually conflict with the goal of rehabilitation. Rehabilitation is difficult to accomplish, for instance, when there is too much emphasis upon deterrence and retribution. An individual subjected to a lengthy imprisonment in order to set an example for others may develop a profound bitterness that destroys rehabilitative efforts. An offender kept in prison beyond the point at which he might have been safely released may undergo personality changes that increase his criminalistic tendencies. An offender who feels victimized develops an aggressiveness toward society, and such an attitude also is antagonistic to the rehabilitative process. Obviously, it is difficult to punish and help an offender at the same time.

For a number of reasons, the goal of rehabilitation is not widely supported in our correctional system at this time. The increase in crime rates, particularly in crime that is now affecting middle- and upper-class citizens, has led to a societal ethos of "getting tough" with the criminal. Rehabilitative efforts are frequently viewed as "coddling." But it is not only "hard-liners" who are skeptical of the merits of rehabilitation. Advocates of deterrence theory argue that we should focus on prevention of crime by swift and certain punishment. A corollary of this thesis is that we should put less effort into trying to change the offender who has already been convicted. Other researchers have presented rather powerful evidence that the

majority of efforts so far undertaken to rehabilitate criminals have been unsuccessful (Martinson, 1974). Finally, civil rights advocates have noted that many offenders are kept incarcerated for long periods of time because correctional officials believe that they need further rehabilitation (Morris, 1974). Under some systems of indeterminate sentencing, an offender may spend a longer period of time in prison awaiting rehabilitation than he would have spent if he had received an ordinary prison sentence. Furthermore, the guidelines by which the offender's rehabilitation is determined are so vague and flexible that the offender may feel trapped in a situation where he perceives no exit. Even many offenders are now beginning to object to the concept of rehabilitation. While the goals of rehabilitation may be different from those of incapacitation, deterrence, or retribution, all these goals can be invoked as a justification for depriving the offender of freedom. The offender who is locked up so that he can be rehabilitated perceives himself as being punished as much as or even more than if he were being locked up for the goals of incapacitation, deterrence, or retribution. With such formidable forces as "hard-liners," academicians, civil libertarians, and even offenders themselves aligned against rehabilitation, the advocates of a rehabilitative approach are experiencing hard times. Yet it is too early to sound the death knell for the concept of rehabilitation. It will be useful to try to point out the absurdity, if not the impossibility, of trying to deal with the violent offender without some commitment to the goal of rehabilitation.

In a recent article, Ann Witte, an economist, and I presented a case for society's retaining a commitment to the goal of rehabilitation as at least a part of our system of criminal justice (Halleck and Witte, 1977). We made five major points:

1. The case that rehabilitation does not work is far from proven. Those who oppose rehabilitation not only have made a number of methodological errors in their work but also have failed to take a careful enough look at the concept of recidivism. Although rehabilitation programs may not reduce overall rates of recidivism, there is evidence that some of these programs significantly reduce the severity of subsequent crimes committed by the treated offender. There have been no good studies of the effectiveness of rehabilitative programs in the last ten years, and it is conceivable that some of the newer approaches may be working. Furthermore, very few of the rehabilitation programs thus far studied can be viewed as intensive,

well-financed, or well-staffed enterprises. Even if the research methodology of the rehabilitation opponents were faultless, they merely would have proved that the more or less perfunctory treatment approaches of the past have been of little help. The question of whether serious, intensive, and well-financed rehabilitative programs would work remains moot.

2. The findings of deterrence theory, correctly analyzed and implemented, should not lead to practices that are entirely incompatible with rehabilitation. We may decide that the primary purpose of imprisonment or institutionalization is to prevent others from committing crime, but such decisions should not militate against concurrent efforts to reform the offender who is serving as an example.

3. The goal of rehabilitation can certainly be used capriciously as an excuse for keeping unpopular offenders incarcerated for long periods. Norval Morris, however, has enunciated a simple solution to this problem; namely, that the sentence of a convicted criminal should never be extended for the purpose of rehabilitation, but only for the purposes of incapacitation, deterrence, or retribution (Morris, 1974). If the goal of rehabilitation is not invoked to deprive the offender of freedom, but has a neutral effect upon his length of incarceration or reduces that length, the civil liberties issue disappears.

4. As long as we have any motivation to deal with the incarcerated offender in a relatively humane way, it is extremely difficult to do away with the goal of rehabilitation. "Benign warehousing" of offenders presupposes a population of inmates deprived of hope and a population of keepers deprived of any purpose other than maintaining security. As long as there is a shred of benevolence in those who run correctional institutions, they will try to do things for the offender which will change him in a way that is good for him or good for the society. Once they do this, they are already practicing rehabilitation.

5. Rehabilitation is economical. Even if only a very small percentage of offenders can be rehabilitated, the state will save between ten and twenty thousand dollars each year that any of these offenders is kept out of prison. Overcrowding in our prisons is already imposing an absurdly expensive burden upon our state and federal correctional systems. Unless these individuals are diverted from imprisonment or rehabilitated, the financial burden on our correctional system will be staggering.

For all the above reasons, plus a commitment to the idea

that helping even those who have trespassed against us has an inherent moral rightness, I believe that rehabilitation should remain a major goal in dealing with violent offenders. Imprisonment or institutionalization of a large number of violent offenders may be necessary for incapacitation, deterrence, or retribution. But these other goals should never be allowed to become so predominant that they discourage us from the task of rehabilitation or, worse, make rehabilitation impossible to achieve. In the remainder of this paper, I will discuss some of the settings in which efforts are made to rehabilitate violent offenders, some practical and theoretical aspects of rehabilitation, and some problems inherent in the rehabilitative approach.

Where there is convincing evidence against the offender who is apprehended after committing a violent crime, there is a strong likelihood that he will end up in prison. This, however, is not always the case. A growing number of violent offenders are being found incompetent to stand trial and are being diverted to hospitals for the criminally insane (which I will refer to as forensic institutions). A large number of these offenders are never found competent to stand trial, and much of their actual treatment is conducted in the forensic hospital. Similar considerations apply to offenders found not guilty by reason of insanity. A few states also attempt to treat certain forms of dangerous and usually violent sex offenders in specialized programs located in hospitals for the criminally insane. Still another small group of known offenders may be treated in private or public mental hospitals. This latter group is usually made up of relatively sophisticated and affluent offenders who, for reasons beyond the scope of this paper, are allowed to seek rehabilitation in comparatively benign settings (Halleck, 1974b).

The major problem in attempting to rehabilitate or treat (in the remainder of this discussion, I may use the terms *rehabilitate* or *treat* interchangeably, but the reader should be mindful that there is some distinction between these terms) offenders in correctional or forensic settings is lack of treatment staff. Educational services in these institutions are definitely second rate. Counseling, psychotherapeutic, and psychiatric services are even worse. The prison setting, with its low salaries, grim working conditions, and ever present threat of violence, usually cannot attract skilled professionals. Shortages of psychiatrists are especially troubling. The number of psychiatrists actually working with violent offenders has diminished rather than increased in the last forty years (Halleck, 1974a). At the same time, the

offender population has markedly increased. The situation is not much different in the forensic setting. Hospitals for the criminally insane are poorly staffed, and psychiatrists in these institutions spend more time in courtroom work, determining what is to be done with an offender, than they spend actually trying to help patients. Current harsh conditions in both types of institutions also interfere with the rehabilitative process. An offender systematically deprived of gratifications of basic needs for intimacy, assertiveness, autonomy, responsibility, and privacy is likely to be too oppressed to have the capacity to work on any psychological issue other than retaining his sanity. In many institutions even his physical survival is constantly threatened. Rehabilitation cannot reach full effectiveness in archaic, understaffed institutions where the offender is more likely to learn negative than positive things about himself and society. The issue here may not be so much a conflict between the goals of rehabilitation and retribution as it is one of prison reform. Deprivation of freedom is a sufficient punishment in itself. Deprivation of freedom in an environment where one's sanity and survival are constantly threatened is an exceptional punishment, which in many institutions negates the hope of rehabilitation.

Given these harsh realities, the scope of rehabilitative services currently available for violent offenders is grievously limited. One of the few bright spots is in the area of religious counseling. Clergymen have by and large been welcomed in the correctional setting, and they have persistently sustained an interest in the offender. Occupational and other types of educational training are better than they were ten or twenty years ago, but they are still inadequate. Many of the vocational skills the offender is allowed to learn in prison are not relevant to attaining a job in the outside world. Too many of the educational programs lack the facilities to deal with learning impairments of a significant number of offenders; the exceptionally intelligent offender is rarely allowed to experience his full intellectual potentialities. Therapy programs are also limited. Long-term individual psychotherapy is rarely available to the offender. Group therapy is more common, especially in forensic settings or in specialized programs for sex offenders. Family therapy is practically nonexistent. Precise behavior modification programs have in the past been used with little concern for offenders' rights. They are now limited by statute and litigation (Bonnie, 1977). Of course, a sloppy kind of behavior modifica-

tion, in which the offender is rewarded for "good behavior" and punished for "bad behavior," is an inherent part of the correctional setting. Finally, psychiatrists sometimes use psychotropic drugs to treat offenders who may also be mentally ill; whether these drugs are used wisely in the prison or forensic setting is debatable.

Leaving this gloomy picture aside for a moment, it may be more fruitful to speculate upon what could be done to rehabilitate violent offenders if our institutions were adequately staffed and were more benign. Assuming a correctional or forensic environment in which an individual could be provided with safety, gratification of basic human needs, and a certain amount of dignity, there are a variety of things we could do with violent offenders that might change them in a way that is good for society and good for them. To begin with, a small but significant number of violent offenders are best thought of as mentally ill. Some suffer from episodic dyscontrol and other seizure disorders. When these disorders are accurately diagnosed and treated, they can be at least partially modified. The schizophrenic or manic patient, when his disturbance of thought or mood is controlled, experiences a higher level of comfort and a greater capacity to function in interpersonal situations. If his violence was in any way related to his thought or mood disturbance, it is reasonable to assume that treatment of such disturbances will diminish his propensity to violence. On the basis of experience in treating the mentally ill who are not identified as criminals, there is good reason to believe that, if a thorough neurological and psychiatric evaluation were made of all violent offenders, at least a small percentage of them would be diagnosed as mentally ill, given appropriate treatment, and perhaps rehabilitated.

Many violent offenders have had disastrous educational experiences. In some cases their educational failures may have been related to congenital learning impairments. There are limits to the extent to which we can correct dyslexia in adults, but with sophisticated educational techniques we could probably help at least some of these individuals learn to compensate for their difficulties and to achieve some success in simple skills such as reading. We can also help these people appreciate the nature and extent of their impairment and help them find ways of preserving their self-esteem when they must undertake certain societal tasks from a disadvantaged position. Presumably, a certain number of individuals who overcome or learn to deal

with their learning difficulties may subsequently be able to deal with interpersonal and societal pressures in a way that diminishes the probability of their being violent. Similar considerations apply to the issues of occupational skills. Violence is highly correlated with poverty. Offenders who have the opportunity to learn work skills that might increase the probabilities of their attaining gratifying employment can move away from the culture of poverty. Some, but not all, of these individuals would experience sufficient stress reduction in their lives so as to diminish the probability of their future violence.

A certain amount of violence is determined by learning experiences in early childhood, particularly experiences in which the offender himself was an early victim of violence (Halleck, 1977). It is useful for the offender to learn how he has come to use violent responses to deal with certain types of situations and how he can use more adaptive responses. To a certain extent, such learning can take place in traditional individual psychotherapy. Such psychotherapy will almost always incorporate many of the principles of behavior therapy, particularly those directed at teaching the individual alternative responses to violence. Individual psychotherapy has the additional advantage of providing the offender with some information as to how he is influenced and how he influences others. This information may change his motivation and perceptions of situations in a way that leads to more adaptive behavior.

Group psychotherapy provides the same advantages as individual psychotherapy and is especially useful in the correctional setting. Some of the alternative responses to violence may require assertive or intimate behaviors. In a noninstitutional setting, a patient can experiment with such new behaviors with his therapist and then try them out at home or at work. In a correctional setting, experimentation with assertiveness or intimacy outside of therapy may be punished by the institution. Even in prison, however, the group provides a stage on which new behaviors or alternative responses to violence can be rehearsed. The group does not quite constitute the real world for the prisoner, but it may be the only world in which he can learn to increase his capacity for nonviolent behavior.

Family therapy can also provide new learning and an opportunity for an individual to practice new behaviors with individuals whom he may eventually be involved with on a day-to-day basis. It has the additional advantage of exposing and, in many instances, eliminating stresses that may have played a sig-



nificant role in the offender's violence. Interpersonal and especially familial stress is a significant factor in many acts of violence. To the extent that the offender and the family system learn to behave in ways that minimize such stress, the offender's propensity toward violence will be diminished. The use of family therapy in treating violent individuals is highly desirable. At least in theory, it should often work. Unfortunately, it is extraordinarily difficult to implement family therapy programs in a correctional or forensic setting. Our institutions are usually located in areas to which the family cannot easily travel. The offender often feels that he cannot be too assertive in dealing with family members, since, if he speaks too honestly, they may not return to visit him and he will become even more isolated and helpless. The situation could be remedied if we either built our institutions closer to major metropolitan areas or simply provided funds for bringing families to the institutions and offering them lodging during periods of intensive family therapy. This would, of course, incur some expense to the state, but such expense would be trivial in comparison to the cost of violence and the cost of prolonged incarceration of violent offenders.

The most perplexing problem in dealing with a violent offender is determining when it is safe to release him from custody. If we adhere to the simplest definition of rehabilitation, as changing the offender in some way so that he will not repeat his crime, we still have difficulty in predicting when any given offender is rehabilitated. At the same time, our courts and institutions cannot avoid making predictions about an offender's potential recidivism. Even with the current clamor for fixed sentences, judges probably will continue to have considerable leeway in fixing both minimum and maximum sentences, and the use of parole with potential early release probably will be continued. Most violent offenders who are sentenced to prison will have to be released at some time. How can we determine what is the most propitious moment?

The question of when to release the offender is best considered in terms of risk-benefit ratios. The major risk to society in releasing a person who has previously been violent is that he will again commit a violent act. There are other less obvious risks. Release that comes too early may diminish the general deterrent effect for some crimes, such as homicide. In addition, if the community does not feel that sufficient retribution has been imposed upon the offender, some members of the commu-

nity may take justice into their own hands. (This is a small risk, but it is always present when a crime is especially heinous.) The benefits of releasing the offender from incarceration may be considered for both the offender and society. A released offender benefits, of course, by obtaining freedom. Society also obtains benefits, some tangible and some intangible. The tangible benefits are financial. When society releases an offender, it saves the costs of incarcerating him and perhaps supporting his family, and it may gain from the offender's new productivity as a taxpaying citizen. Intangible benefits are primarily moral. A forgiving society, which favors reform over retribution, is behaving in conformity with the religious tenets of the prevailing Christian ethic.

The benefits of releasing an offender are easy to assess. The risks of release, however, are almost always difficult to determine. Behavioral scientists have little skill in predicting the occurrence of a violent event. Violence is a relatively rare event, and predictors in this area are notoriously prone to overpredict violence (Monahan, 1974). The situation is a little less complicated when we are dealing with men who are already known to have committed a violent act (Kozol, Boucher, and Garofalo, 1972). Here there is probably a little more accuracy in predicting future violence, and less tendency toward overprediction. But even when we have the evidence before us that an individual has already been violent, we still make many errors, both in overpredicting and underpredicting violence. Overprediction is tragic for the offender. Underprediction is even more tragic for the innocent victim.

How can we begin to sharpen our criteria for determining release dates? First of all, we might try to develop a typology of violent crime by studying the natural history of different types of offenders. Such studies could focus either on the nature of the crime or on the psychological and sociological attributes of the offender. We have reason to believe, for instance, that some violent crimes—most notably, homicides occurring around domestic disputes—are unlikely to be repeated (Wolfgang, 1958). Usually, once the party who has offended the murderer in a domestic dispute is eliminated, the murderer is unlikely to kill in the future. There is a difficult moral problem here for society. The perpetrator of one of the most heinous of crimes may be a person who, for practical purposes, is rehabilitated once the crime has been committed. For many of these offenders, imprisonment serves only the goal of retribution. Rehabili-

tation efforts may help the offender deal with aspects of his life that were not directly related to the homicide, but otherwise such efforts are irrelevant. Whatever society decides to do with these individuals, it can be guided by the knowledge that there is a relatively low risk of their committing another violent crime. Other violent offenders, however, such as rapists, child molesters, and sadistic murderers, are likely, given the natural history of their disturbances, to continue to hurt others unless they are restrained or reformed. The risks in releasing this type of offender are usually greater than those involved in releasing an individual who has been violent around an issue of domestic discord.

Another variable that seems to be related to repetitive violence is age. We know that most crimes, including violent crimes, are primarily committed by youth. Violent crime is rare in individuals over 35, and extremely rare among the elderly. A man who is imprisoned at age 20 and spends the next fifteen or twenty years in jail is, in a broad statistical sense, unlikely to present too great a risk to society if released. Middle-aged and elderly offenders—for instance, male sex offenders, who begin to lose some of their sexual drive in their 40s—are generally less likely than younger offenders to repeat their crimes.

There are also some obvious social variables that diminish risk. The offender who returns to a stable family, a good job, and a relatively secure place in the community is less likely to recidivate than one who does not enjoy such advantages. Other more specific environmental factors may also play a role in attenuating risks. A man who has been sexually molesting his own children may no longer represent a violent threat to society when his children have grown up. A pedophile teacher may represent less of a threat to society if he takes on a new occupation and is kept away from young children.

Our criteria for determining release dates might also be sharpened if we could learn how various personality characteristics and emotional disturbances relate to future violence. Recent data suggest that the mentally ill may be more dangerous than others (Halleck, 1977). But we need more sophisticated research which tells us something about the natural history or prognosis of violent individuals who have different forms of personality disorders or mental disabilities. Those who work to rehabilitate violent offenders often believe that they can detect changes in the offender which augur for a favorable prognosis. Changes in the offender's attitudes toward others, professed

changes in the offender's motivations, changes in his behavior while in prison, and even changes in his family system are sometimes believed to reduce risk of subsequent violence. Conceivably, some of the above-listed changes do alter the natural history of violent behavior. The problem is that we do not know which specific kinds of changes are most likely to reduce the risk factor.

Finally, we do not have data that tell us whether providing counseling, vocational, or educational services to the offender once he is released will be effective in diminishing recidivism. Most of us believe that continuing rehabilitative services in the community diminish the risk of recidivism. But given our current state of knowledge, we cannot be certain that this is true.

While our capacities to predict the probabilities of future violent behavior and future risk to society are currently limited, the situation is far from hopeless. We will never attain certainty in prediction, and probably not even near certainty; but, with extensive and well-funded research in many of the areas discussed here, we can certainly improve our skills in determining the probability of risk. Social agencies will still have to make their decisions regarding release on the basis of risk-benefit ratios, but more precise definitions of degree of risk will certainly make their task easier.

A final word should be said about the ethics of rehabilitation. I alluded earlier to the possibility of rehabilitating (in the most simple sense of this term) a large number of offenders by drastic interventions, some of which might involve physical and psychological mutilation. Our society currently rejects such interventions and views them as barbaric. But we may soon develop drugs that will diminish an offender's potential for violence at much less expense to the offender's future potentialities; that is, the drugs may diminish not only the individual's violent potentialities but other aspects of his humanness as well, but such changes may not be so drastic as to make them immediately distasteful to society. When such technologies are developed, we will have to make excruciating ethical decisions about their use. Recent court decisions have been in the direction of arguing that incarcerated individuals cannot provide informed consent to participating in experimental rehabilitative procedures. It is unlikely, however, that we will hold to such a position if the crime problem becomes worse and if the technologies become less obviously mutilating to the offender. The ethical

question of how far society is entitled to go in changing an offender's psychology and physiology in the name of rehabilitation will, in my opinion, eventually become more important than the current simplistic debates as to whether we should punish or treat violent offenders.

# The Adversary System

*Michael Perlin*  
*Robert L. Sadoff*



The relationship between law and psychiatry has been characterized as an uneasy *détente*, a shotgun marriage, or a *mariage de convenance* (Robitscher, 1966). Some believe that psychiatrists have a social obligation to involve themselves in courtroom proceedings; others maintain that they should remain out of the courthouse at all times. To say that many lawyers look at psychiatry with incredulity understates the image (Wiehofen, 1954); similarly, many psychiatrists speak of the legal system in a tone of derision approaching contempt (Zilboorg, 1939).

In spite of the hostility exhibited by professionals in both disciplines, it is strikingly clear that law and psychiatry intersect at a point where motives, intent, and drives can be examined in the context of rights, obligations, duties, and the social order. Although this dynamic interplay is important in all areas of

behavior—ranging from family matters (divorce and custody proceedings) to traditional civil disputes (negligence and estate cases), not to mention matters where a person's mental health is the central focal point (commitment hearings, contractual competency cases)—it is especially significant in the area of criminal law, criminal responsibility, and criminal punishment. This significance is underscored even more heavily in the context of a violent criminal act.

It is here that the basic assumptions of the legal adversary system are most often questioned, and it is similarly here where the expertise of psychiatrists as special witnesses in the criminal justice *apparat* is scrutinized. Although the Jack Ruby trial and the Patty Hearst trial might both be idiosyncratic, they helped to make the public increasingly skeptical of the use of psychiatric testimony in the legal process. Trials of this sort—with their violent acts, circus-like atmosphere, flamboyant counsel, evidence of serious criminal behavior, and gross confusion regarding the rationale for and purposes of the adversary system—have highlighted (or perhaps “low-lighted” is a more appropriate phrase) the problems inherent in the collision of the legal and psychiatric systems (Ross, 1965), and have underlined the need for new awarenesses of the intersection of those systems in the context of violent criminal acts (Burt, 1974).

That intersection, of course, is not limited to cases involving the insanity defense (Goldstein, 1967). It is also an issue (and *at* issue) in a whole range of matters, including (1) a defendant's competence to stand trial (see *Drope v. Missouri*, 1975); (2) cases in which a defendant sentenced to a penal facility is subject to transfer to the state hospital (usually so denominated for the “criminally insane”) and/or to retransfer to the prison; (3) the sentencing process of a defendant who, although responsible for his acts, is mentally ill (Schiffer, 1976); (4) other pretrial and posttrial issues in which psychiatric evidence might be crucial to the disposition of the case (Perlin, 1975). The issues come into sharpest focus, however, in cases where the defendant pleads “not guilty by reason of insanity.” In these cases the defendant's attorney argues that, although the defendant may have committed certain physical acts—resulting, for example, in a violent death—his mental condition precludes a finding of responsibility for the acts in question. That is, his condition deprives him of that criminal intent, or *mens rea*, necessary as an element of every crime (Goldstein, 1967). In the words of Fingarette (1972, pp. 60-61), “It is the *responsibility*

*orientation* that is a central value and not the mere reduction of criminality."

Simply put, it is in the adversary system of criminal justice that the law and the behavioral sciences come together to approach an understanding of, and appropriate management of, individuals who have perpetrated violent acts in the course of their "criminal" behavior. (The word *criminal* is used advisedly. As indicated, if a person who has physically committed certain acts is not "responsible" for them, the acts cannot and should not be denominated as "criminal.") The adversary system, in the context of a criminal trial, is that means by which a person charged with criminal behavior is dealt with in American society: it is a system for determining (to some extent, at least) the "facts" of the case and arriving at the legal "truth," from which a disposition may be made. The adversarial system, which arose in part as a response to medieval practices such as trial by ordeal and trial by battle (Smith, 1965), presupposes two keenly partisan lawyers of roughly equal competence "fighting it out" before a neutral, impartial judge and using the tool of cross-examination to best ferret out "the truth" (see Frank, 1949; Menninger, 1968; Weinstein, 1966).

At the outset, there are several glaring exceptions to this doctrine, since we have determined that other values are sometimes more important than "the truth." There are legislative exceptions (such as privilege and confidentiality statutes), constitutional exceptions (for example, the Fifth Amendment privilege against self-incrimination), and judicial exceptions (such as the exclusion of illegally seized evidence and involuntary confessions). Whether the exception be for the reason of prophylaxis, where guilt is clear (see *Map v. Ohio*, 1961), or to deter unlawful police behavior where guilt may not be clear (see *Chambers v. Florida*, 1940; *Miranda v. Arizona*, 1966), our policy is that "the truth" is often not as meaningful a goal as is "justice." In another context, the observation by Lord Devlin is worth noting: "Trial by jury is not an instrument for getting at the truth; it is a process designed to make it as sure as humanly possible that no innocent man is convicted" (quoted in Kalren and Zeisel, 1962, pp. 337).

In the "normal" criminal trial, the witnesses are usually directed to answer two key questions: "Did a crime take place, and did the defendant commit the crime?" Witnesses, thus, usually testify to "facts" (for instance, a man approximating the defendant's description, wearing a red jacket, was seen on a



corner of State and Market brandishing a rifle; a red-jacketed, rifle-bearing man accosted the victim near State and Market and demanded her money), which the defendant can, at his option, choose to rebut (the presumption of innocence and the privilege against self-incrimination being read together, so that no negative inference is permissible if the defendant chooses not to testify) with other "facts" (for instance, the production of a ticket stub showing that the defendant was in Portland at a basketball game at the time of the robbery). Or, if a witness is qualified as an "expert," he or she can testify to *opinions* on matters beyond the ken of the average lay person. Thus, the state can call a ballistics expert (to testify that, in his *expert opinion*, the bullet hole in the sidewalk on State and Market came from the defendant's gun), who can, perhaps, be rebutted by the defendant's expert (in whose *expert opinion* the hole was caused by an entirely different sort of gun).

Opinion evidence presented in a case involving the insanity defense, however, is very different from that presented in the "normal" criminal trial by ballistics experts, fingerprint specialists, toxicologists, and the like. In an effort to better understand the exegesis and etiology of violent behavior, and in an effort to answer the question of the defendant's responsibility for the act in question (for it is the rare insanity defense case in which the physical actions or the identity of the defendant are denied), a sometimes bewildering array of behavioral scientists—including, but not limited to, psychiatrists, psychologists, social workers, psychopharmacologists, and sociologists—have all been admitted as expert witnesses in criminal trials involving violent behavior. The pithy observation by Diamond and Louisell (1965, p. 1340) that "the psychological sciences differ from the biological sciences in that the subject matter of the former is not visible" probably best explains why the use of psychiatric (and other behavioral) testimony has traditionally been met with hostility and mistrust in the judicial system, whereas evidence of bullet comparisons, poison types, and handwriting exemplars is regularly accepted with rarely a questioning word (Perlin, 1975).

The bulk of the writing, case law, and academic debate regarding law and psychiatry centers on the existence and various formulations of the insanity defense (see, for example, "M'Naghten's Case," 1843; *Durham*, 1954; and the *Model Penal Code* of the American Law Institute, 1962). Although this debate continues to grow in intensity, it may mask the underlying

issues "often far more critical to the disposition of a case than the individual formula used, . . . including the reasons behind the basic hostility toward and mistrust of the whole concept of an insanity defense by all parties as well as the public" (Perlin, 1975, p. 146).

How, then, is the insanity defense presented within the confines of an adversary system (see Polsky, 1961; Sadoff, 1966)? As indicated above, the psychiatrist who testifies "must be aware of the rules of the game, the players and their roles, and special procedures relating to his work" (Sadoff, 1975, p. 47). This, by necessity, goes beyond the questions of content into a discussion of *how* the adversary process is carried out. The answer to this question can best provide the clues to understanding the way the violent person is dealt with by the criminal justice system in matters involving questions of responsibility.

Initially, the psychiatrist cannot be seen as just another expert witness; he must work together with the attorney on an almost intimate basis at every step of the proceedings, in an effort to obtain as much information as possible about the defendant and the reasons for his violent behavior. Was it the result of a psychotic episode, or was it drug or alcohol induced (thus resulting in a significant lowering of inhibition), or did it stem from organic brain syndrome or other organic conditions impinging on brain functioning—conditions such as temporal lobe epilepsy, cerebral tumor, arteriosclerosis, or hypoglycemia (Fox, 1963)? Among the functions of the consulting psychiatrist is to aid the court, the prosecutor, or the defense counsel (see Sadoff, 1975, p. 55) in determining whether the violence was legally justifiable. Specifically, the psychiatrist working for the defendant must be a gatherer of data from all sources. He must obtain records, if available, of previous mental illnesses or hospitalizations; he must examine school records, juvenile records, social service records, and army records; he must talk to parents, family, friends, and neighbors, to obtain as much background information about the defendant as possible. He must also attempt to obtain as much data as possible about the defendant's state of mind at the time of the offense (since the expert witness, unlike fact witnesses, was not present); thus, he must speak with the arresting officers; jail guards; the defendant's cellmates, if available; and any other persons who come into contact with the defendant on a daily basis. He must also have access to autopsy reports (in case of death), the statements made by the defendant to police at the time of arrest, and any

statement of eyewitnesses whose testimony might bear on the matter in question. He may have to request psychological testing by an experienced forensic psychologist (who will know how to apply his findings to the legal questions involved), an electroencephalogram, a skull X ray, or other neurological or organic tests (to determine whether there is brain damage or some other malfunctioning organic condition).

If the defendant states that he does not remember what occurred at the time of the crime and that this lack of memory will prevent him from working with counsel to present a rational defense (Robey, 1965), the consulting psychiatrist must determine whether the defendant is lying. (The mere fact that a defendant has amnesia will not, of course, be enough to exculpate him. See *People v. Francabandera*, 1974; *State v. Kociolek*, 1957.) In such situations the psychiatrist may wish to obtain a polygraph examination. Although the results of the polygraph may be inadmissible in evidence (*State v. Melvin*, 1974; *State v. McDavitt*, 1972), especially if the examination involves questions bearing on guilt or innocence, it may still be an essential tool for the psychiatrist, who needs to know whether his client is telling him the truth about his lack of memory. If, in fact, the defendant is shown to be truthful about his lack of memory, it is likely that he has a bona fide amnesia. The psychiatrist must then inquire into the cause of the amnesia. Was it caused by organicity, head injury, traumatic physical shock, alcohol toxicity, narcotic drug intoxication, or a psychological repression resulting from emotional shock? The examining psychiatrist must be able to determine the nature and cause of such amnesia, since it may be tied in with the cause of the violent behavior. In such cases sodium amytal interviews have helped the defendant recapture his memory and "redevelop" his experiences at the time of the crime. It may then be demonstrated whether the defendant was suffering from, for instance, a psychotic reaction, excessive alcohol intake, or an emotional repression due to severe anxiety or depression. Again, although the results of this interview may not be admissible in court, the test itself may prove invaluable as an aid to the psychiatrist in formulating his opinion of the defendant's responsibility for the acts in question.

In addition, the psychiatrist and the attorney must work together, in one or more pretrial conferences, to prepare for the presentation of testimony in court. At this time all information obtained should be discussed, and plans for direct examination,

as well as means for coping with cross-examination, should be outlined (Dixon and Blondis, 1976; Ziskin, 1975). The lawyer must inquire into the doctor's orientation, his understanding of the forensic role, and "his willingness to cast his testimony in certain terms" (Shadoan, 1972). He must also impress upon the witness that he is being called because of his medical expertise regarding the defendant's condition, *not* so that he can testify whether the defendant needs to be punished or treated. The doctor must make a medical judgment; it is up to the judge or the jury to apply legal tests to all testimony in order to determine criminal responsibility.

A well-prepared witness in the adversary process will present the material clearly, cogently, and directly to the court. Like any other expert witness, he will and should be susceptible to probing, complete, and (perhaps) uncomfortable cross-examination. Although the testimony of any psychiatric witness can be effectively attacked through well-prepared cross-examination, if the witness testifies simply, completely, and honestly, it is likely that little real damage will be done. An expert witness should couch his testimony in simple, clear, descriptive English, avoiding recourse to incomprehensible jargon; at the same time, he should not talk down to the court and/or jury, and he should not try to "out-lawyer" the cross-examiner.

Once an expert takes the witness stand, his allegiance is only to the court. Although he will be called only by the side that considers him helpful (and will be cross-examined by the opposition in an effort to cast doubt upon the strength of his testimony), he must be neither defensive nor argumentative in the course of his testimony. Testifying is an art. Neither the witness nor his ideas are on trial; however, he must be able to anticipate effective, challenging cross-examination, and he must be ready to rebut it.

The witness must present to the judge and/or the jury—to the best of his expert ability—the clinical reasons why the violent behavior occurred in the form of the actions committed. The witness is not called to testify in order to excuse, justify, or exculpate the actions, but to explain and thus help others understand *why* the violent behavior occurred. Ideally, the adversary system can be a helpful and useful tool in arriving at this understanding, as well as promoting the interests of justice.

As indicated above, however, even under the most ideal of circumstances the lawyer and the expert witness still must come to grips with the vexing question of why the judicial

system reacts as it does to the insanity defense. In an excellent empirical analysis of this problem, Chernoff and Schaffer (1972)—practicing criminal defense attorneys with considerable courtroom experience in cases involving the insanity defense—state, both bluntly and accurately: “The chances of success do not depend on the degree of illness, as the legal theory would suggest; rather, they depend upon the nature and seriousness of the offense, which may prejudice the jury against the defendant, and upon whether the defendant’s illness is manifested by overt symptoms which the jury can easily recognize” (p. 524). This problem has been specifically underlined by the District of Columbia Court of Appeals, which has recognized that a jury may be reluctant to find a defendant innocent by reason of insanity *if the crime at issue is especially heinous* (see *U.S. v. Bennett*, 1972). Similarly, from their analysis of the manner in which persons found not guilty by reason of insanity are treated when they are hospitalized, German and Singer (1976, p. 1085) conclude that “no group of patients has been more deprived of treatment, discriminated against, or mistreated than persons acquitted of crimes on grounds of insanity.” As these authors suggest, the only adequate explanation for such gross discrimination is that the authorities seek—consciously or unconsciously—to punish persons found not guilty by reason of insanity.

What, then, are the roots of this courtroom hostility? Certain answers suggest themselves on both practical and analytical levels.

1. The criminal must be punished as an outlet for the internalized and moralized (but repressed) aggression of society, to show the guilty party that he “can’t get away with it”; to establish an equilibrium between the id and superego, thus maintaining a balance between indulgence and punishment and sublimating “dangerous impulses”; and to focus on the criminal as an example of the temptations which befall the remainder of society (see Flugel, 1961). Thus, the jury, as the conscience of the community—which generally distrusts, for different reasons, doctors, lawyers, and criminal defendants—must punish the defendant in spite of the “law of insanity.”

2. The overassertion of the prosecuting, punitive attitude toward lawbreakers reveals the intensity of one’s own inner struggles and the instability of one’s own emotional equilibrium (Wiehofen, 1956). According to Nietzsche, “No one is more ferocious in demanding that the murderer pay for his crime than the man who felt strong impulses in the same direction.”

Or, as Abrahamsen (1964, p. 3) has stated, "[law-abiding citizens] unconsciously identify with the criminal because of their latent antisocial tendencies and somehow vicariously demand and accept the punishment to relieve their own guilt feelings."

3. The well-known "combat feelings" of many litigants (Frank, 1949, p. 374), with whom their lawyers often identify may drive the attorney to "victory" as a means of satisfying his own aggressive urges (Schoenfeld, 1973). The exceptional role of the insanity defense in the courtroom—raising as it does so many unconscious fears and hostilities—might reasonably result in an even higher level of aggression.

4. Goldstein (1967) has suggested that the legal system simply does not understand the insanity defense and, thus, will not tamper with its roots, because such an acknowledgment of the defense's deficiencies, in response to nonlegal criticisms, might appear to be an admission that others know more about an area which involves its own expertise. Although the results are clearly dated, it is still of some significance that a 1951 poll showed that lawyers had a higher distrust of psychiatrists than did any other group of professionals polled (Wiehofen, 1954). The trial judge may say, "He doesn't look sick to me," or, even more revealingly, "He is as healthy as you or I." Lasswell (1974) has pointed out that judges, jurors, and attorneys have been adverse to enlarging the scope of the insanity defense, "especially if defendants fail to conform to popular images of 'craziness'" (pp. 77-79).

5. According to Katz and Goldstein (1963), as long as our unconscious feelings of apprehension, awe, and anger toward the sick are hidden by a conscious desire to protect them, the problem of the insanity defense will remain unresolved. The system, they argue, must acknowledge its wishes to neglect, destroy, stigmatize, and punish through a system of restraints before the problem can be meaningfully confronted. Burt (1974, p. 276) similarly suggests that "The conflicting motives provoked by the spectre of mental illness—in simple outline, solicitude and fear—appear to have induced state paralysis." It goes without saying that these feelings and drives are even stronger in the case of a violent criminal act.

6. Similarly, what McGarry (1969) has characterized as "professional narcissism" has made many psychiatrists reluctant to expose themselves to challenge in an arena where final authority is not their own. A less obvious side of the same coin may be no less significant. Among less secure mental health pro-

professionals, there may be a preoccupation with eliciting pathology as a demonstration of one's own expertise. The competence of the psychiatrist may rest on his demonstration of incompetency (or mental illness) in a defendant.

These observations, then, should underscore the fact that the "folkways" of litigating the insanity defense in the adversary process may, in the long run, be far more important than the specific legal formulation used. Until attitudes are reshaped, unconscious motivations examined, and unarticulated fears stated, the legal system's approach to the insanity defense will likely not change. The responsibilities are on all parties; one of the most important functions of the psychiatrist who testifies is to "teach others what [he has] . . . learned; . . . to share with the law, especially the judge and jury, the benefit of his experience and training" (Sadoff, 1975, p. 55). Lawyers and judges should be ready, willing, and able to follow the example of federal judge David Bazelson, one of the true giants in the field of law and psychiatry, who has "invited the world of mental health professionals and criminologists into his courtroom and has extended his courtroom back into the world" (Wales, 1976, p. 694). Similarly, Davidson's (1965, p. 692) observation that "due process may be annoying, but it is a barricade to the march of tyranny" should be considered carefully by all participants in the system.

The specter of a protracted criminal trial on the insanity issue—replete with didactic experts, obdurate jurists, and incomprehensible legal and medical jargon—in certain ways does as much violence to the ideal of the adversary system as the act which is the subject of the trial does to society. It is imperative that all participants in the system—members of the psychiatric and other mental health professions and of the legal profession—begin to work together meaningfully and openly if the "shot-gun wedding" between the professionals is to succeed.

# Treating the Violent Offender

*Denis J. Madden*  
*John Lion*



Many issues that arise in treatment of violent offenders require further thought and consideration (Wilkins, 1975). In addition to the more profound issues, such as the right to treatment or the ethics of forcing someone into therapy (Madden, 1977), important clinical issues also must be considered (Lion, 1972). Traditionally, psychiatrists and psychologists have either avoided treating aggressive offenders or else have undertaken this task most reluctantly. However, the increase in violent behavior on the part of some citizens has placed a social pressure on therapists to control this unacceptable behavior (Shah, 1974). The difficulties in working with aggressive patients and in conceptualizing aggression as a phenomenon are enduring ones. Freud himself did not deal adequately with the subject, and psychiatrists have learned about aggression only indirectly,



through studies of psychosomatic patients presumed to have displaced aggression, as reflected in ailments such as migraine headaches, ulcers, and colitis, and through studies of derivative states and highly sublimated conditions such as obsessive-compulsive neuroses or conversion states.

Psychologists have added much to the literature of aggression through animal studies, laboratory experiments utilizing aggression machines, and simulated hostility devices with populations of normal subjects. These experiments have given conceptual insight into various frustration hypotheses concerning aggression but have added little to our knowledge of the natural state of aggression in man. Laboratory situations often have very little relevance to the violent offender. Consequently, therapists and theorists must derive their knowledge of aggression from actual contact with violent individuals. However, violent individuals are violent only some of the time. When a man has committed a violent crime, little is known about him as a person or about the etiological basis for his behavior. Furthermore, violence is multivariate and comes from many sources.

Effective treatment of a violent offender can be arrived at only through the experiences encountered in the treatment of these individuals. Therapy will be the teacher again. However, not all persons who commit violent crimes can be considered prospective patients. The fact that one has injured, or even killed, another does not mean that he is amenable to treatment. Therapists traditionally work with those who have experienced some form of psychic pain which leads them to seek relief. The work of the therapist begins in the patient's seeking of relief.

### Emergency Treatment

When the clinician is called on to give emergency treatment (Lion, Bach-y-Rita, and Ervin, 1969) to an agitated patient who has committed a violent act, the clinician must attempt to project an attitude of calm and helpfulness. This is not an easy task, and clinicians should be aware of their own feelings of threat and not attempt to offer a false feeling of security to the patient. If other personnel are needed, they should be readily employed. There is a difference between rushing someone with a group of attendants and having personnel visible who can be called upon to assist.

Persons and objects that appear to be threatening to the patient should be removed. Usually the clinician will have more

success if he can speak with the patient alone, after the patient has calmed down. If the patient does not calm down but becomes more and more agitated, it may be necessary to restrain him (Lion, Bach-y-Rita, and Ervin, 1972). Most clinicians are not trained in this area and do well to employ the aid of skilled personnel, who may restrain the patient quickly without endangering themselves. Perhaps also, since clinicians and their staff need to have a feeling of security themselves, they should all undergo training in the management of violent patients. Practice in restraining someone else gives one a sense of confidence, and experience in being restrained gives one an appreciation for the patient's distress under these conditions. Several training films and videotapes are available and might be used as part of the training. (For instance, the Ontario Ministry of Health, in Toronto, has available a 1977 videotape entitled *Prevention and Management of Disturbed Behavior*; and a 16-millimeter film entitled *One Step Ahead* is available from Motorola Teleprograms in Schiller Park, Illinois.) Many are opposed to using restraints and often prefer to use medication. However, medicating a patient increases his sense of helplessness and thus may exacerbate his need to defend in a hostile manner.

If another clinician is to be consulted, he should be made aware that the person being treated is violent. From time to time, clinicians do not inform consultants for fear of biasing their opinion. In cases such as these, this maneuver only endangers the consultant and is not helpful for the patient.

Violent patients usually indicate in some way that they are becoming more disturbed; clinicians should be sensitive to these precursive signs. Agitation, threatening verbalization, and gestures should be taken seriously (Lion, 1972). They can be viewed as pleas for help and expressions of the patient's fear of losing control. Violence is often a defensive maneuver, stemming from fear and panic.

### Taking the History

Violent patients have often engaged in acts that are threatening and antagonistic to the ethics and sensitivities of the clinician. Effectively exploring the past with a violent patient requires patience, leisure, and an attitude free of moral criticism. Clinicians must not only listen to accounts of these acts; they must also actively elicit such information. Often the material being dealt with will produce anxieties in the clinician. His

anxiety may lead him to overlook much material, under the pretext that to probe would only set the patient off. This neglect is in the service of the therapist, not the patient.

Clinicians do not hesitate to go into the sexual history of a patient, nor do they hesitate to ask a suicidal patient about suicidal plans, past acts, means, goals, and the like. Analogous questions must be asked of the hostile or homicidal patient if one is to gain full knowledge of his propensities. The need for such questioning is greater with these patients, since they present a risk to themselves and to other members of society. Clinicians in medical and forensic settings need to inquire about the environment (American Psychiatric Association, 1974); they need to ask specific questions about the patient's access to a gun, his use of a car as a weapon, the existence of an identifiable victim, his abuse of alcohol, and past violent and criminal acts. The best predictor of future violent behavior is a history of previous behavior of this kind. Other predictors may be the examiner's own feelings about the patient's reverence for life and his empathic qualities (Kozol, Boucher, and Garofalo, 1972).

### The Treatment Process

The issue of control is central to the treatment of the violent patient. While clinicians can recognize violent activity easily, they often fail to perceive that violent patients are themselves disturbed by this loss of control. Violent patients actually fear losing control; at the same time, the hypervigilance required if they are to maintain control exhausts them. The affective state thus generated is indeed dystonic, and patients welcome the efforts of the clinician to help restore control and self-mastery. It is therefore imperative for the clinician to convey directly that he will help the patient gain control and will not allow him to go berserk or engage in other uncontrollable behavior. This may require that the patient be hospitalized. Clinicians should not hesitate to offer in-house treatment to this group of patients. Clinicians often fail to suggest hospitalization for fear that the patient will become more disturbed. More often than not, patients welcome this direct intervention on the part of the clinician, especially when the patient greatly fears loss of control (Lion, 1972).

The task of the therapist, at this point, is threefold: (1) He must be able to tolerate listening to the violent history of

the patient. (2) He must not expect the patient to either trust him or show signs of remorse for these acts or fantasies. (3) He must be able to understand and interpret the underlying dynamics of this individual and not be distracted by the patient's presentation of sensational data that may be more distracting than informative.

It is a basic principle of psychotherapy that therapists meet the patient where he is. Violent patients are often labile and are distrustful of benefits that can be derived from "just talking." Since the violent offender not only lives in an ambience of distrust but helps to evoke distrustful responses from those he meets, the therapist must avoid being drawn into that ambience.

All this becomes more critical when one considers that the primary armamentarium of the therapist is communicating verbally with his patients. The patient likewise may use verbal communication as a defense to protect himself from the intrusion of others. While the therapist uses communication to heal, the violent patient may use speech to "con" others. The basic conflict of violent patients in relating to others, including therapists, is thus manifested in early sessions by their apparent unwillingness to accept the communication of the therapist (Carney, 1972).

Clinicians may view difficulties in communication as rejection and as a sign of the patient's unwillingness to enter the therapeutic process. It is more beneficial for the therapist to view this time as a period of testing, during which the patient attempts to determine whether the therapist will accept or reject him. It is also a time for the patient to learn that "just talking" does help. Once the patient has incorporated this concept, even though he still may not attend therapy regularly or communicate fully, the therapist can be confident that the barrier of distrust has been penetrated. A major therapeutic gain has occurred; the therapeutic process has begun.

In addition to communication problems and distrust, violent patients have an impaired ability to recognize affective states preceding or during violent acts. For the individual patient, the therapist must learn physical and psychological signs of violent outbursts. Then the therapist can help the patient identify these signs and recognize what they mean. The patient also must be made conscious of the consequences of his acts (Lion, 1974). In behavior therapy, patients bothered by compulsions or phobic responses are helped to deal with this phe-

nomenon through a process of desensitization. In working with the violent patient, one might consider the process to be one of sensitization. For example, in a group setting the patient may be assigned to play the role of someone committing a dangerous act; or on an individual level the patient may be asked to verbalize what would happen if he were to act in a particularly dangerous way. Patients at first may deny any fear of the consequences of these acts, but this can be seen more as an expression of the intensity of the feelings generating the need for the violent behavior than as an accurate appraisal of their lack of fear of subsequent punishment.

Violent patients often talk in a very generalized way about losing control and may have difficulty in identifying a particular individual at whom their anger is directed. This difficulty stems partly from the patient's feelings of helplessness and fear of further abandonment. The therapist, in a consistent but nonthreatening manner, must help the patient identify the source of this anger.

Therapists do well to keep in mind that violence rarely occurs in a vacuum; instead, it is usually directed toward someone with whom the violent patient has an intimate relationship. Anger that accompanies violence reflects love as well as hate. However, the patient finds it difficult to admit that he both loves and hates the same person. When a patient is able to express ambivalent feelings for the same person, and comes to realize that these feelings are normal, he can begin to deal in a more effective manner with others and will be less likely to resort to violent behavior. This process can begin in a therapeutic interaction of patient and therapist. If the therapist can effectively convey both positive and negative feelings to the patient without threatening abandonment, the patient can begin to realize that such feelings need not destroy a relationship. The therapist whose patient avoids making any negative comment about him should suspect that the patient is unwilling to express his own ambivalent feelings toward the therapist. Violent patients are adept at expressing anger through violent acts and are not adept at dealing with anger in more appropriate ways.

Since the histories of violent individuals reveal compounded deficiencies, especially in relating to others in an individual and intimate manner, group therapy may prove less threatening than an individual approach (Lion, Christopher, and Madden, 1977). A group approach also may be more reasonable because the violent individual lacks insight and cannot enter

spontaneously into a therapeutic relationship. Again, a group process dilutes the homosexual panic often experienced by men who are not accustomed to intimacy with other men. Thus, the group experience presents a safe therapeutic modality for these patients, who might not remain in any one-to-one intensive setting (Lion and Bach-y-Rita, 1970). It also allows the patient to absent himself, to move at a pace consistent with his own development, and to use the group when necessary. Violent patients by and large do not attend therapy regularly. What can be hoped for is that they will make use of the group when feelings begin to erupt and they feel themselves again losing control. Some patients have the mistaken notion that therapy will solve all their problems and abolish impulsivity and aggression which were essentially lifelong in duration. Thus, some patients may come for only one or two sessions and become quickly disenchanted when they see no concrete improvement in their lives. These feelings of entitlement on the part of the patient place many demands on therapists, whether in a group or an individual setting.

While violent patients avoid intimate relations, they can demand exclusive treatment by the therapist. This demand is manifested in several ways. For instance, the patient may attempt to meet with the therapist just before or after the group to discuss matters that "cannot be talked about in the group." Therapists must be careful not to dilute the group process by allowing these meetings to become the forum for discussing issues of therapy. Sometimes, of course, the patient is genuinely confused or has difficulty in responding to emotional issues; in such instances the therapist will need to spend extra time with the patient, but these meetings—and their content—should be matters of subsequent group discussion.

Another way in which patients attempt to be treated in an exclusive manner is to disregard and avoid what other members of the group express as problematic for them. Group members often appear to have little regard for others, particularly during the first few months of therapy; they talk in a collective monologue, expressing little sympathy for the plight of other members. These patients' inability to empathize with others reflects their inability to acknowledge any weakness or helplessness in themselves.

As an extension of the failure of group members to empathize with each other, these patients frequently fail to comment when a member of the group—someone with whom they

had engaged in a heated dialogue or for whom they had expressed some concern—does not appear at the next meeting. The therapist's absence or lateness, however, will quickly become a group issue. The fantasy of these patients is that the therapist is on vacation, involved in more important work, or does not like the group members. Such fantasies reflect the sensitivity of these patients to abandonment, a common theme in their lives. These practices necessitate that groups such as these be led by two therapists, both skilled in group process and sensitive to the dynamics of violent patients, who can tolerate criticism and be supportive of each other.

We have found that the group serves a social function for the patients. From time to time, patients would bring spouses, girl friends, and even children to the group, despite the fact that the attendance of other persons was not encouraged. The man who brought his wife or girl friend into the group was, we believe, attempting to demonstrate his masculinity; similarly, the woman who brought her children was demonstrating that she could be a good mother and that she possessed other feminine qualities. These actions bespeak the persistent problem with sexual role and self-esteem that seems to plague these patients. Another possible interpretation of this behavior focuses on the issue of competition. These patients often wish to demonstrate to others, especially the therapists, that they have children and other personal relationships and are therefore more "normal" than other patients. The behavior also may be viewed as progress, for it is a nonhostile response to what may be perceived as a threatening judgment. It also can be seen as a willingness on the part of the patient to be identified with another individual.

There are occasions when the bringing of a spouse or girl friend might be encouraged by the therapist—especially when the patient targets his hostile feelings on this individual. Perhaps these significant others are acting in a provocative manner, making it all the more difficult for the patient to deal with his hostile urges.

### Use of Medication

As stated in the literature, the drug treatment of violent individuals is eclectic, and there is no one medication for treating violence (Lion, 1975). This is understandable when the violence is viewed as reflecting varied deficits in personality. Treatment of the underlying condition is the rule. Thus, when an

epileptoid condition is suspected, anticonvulsants are the drugs of choice (Monroe, 1975). For psychosis the major tranquilizers will mitigate the condition and hence the aggression that accompanies it (Itil and Wadud, 1975). Minor tranquilizers, such as the benzodiazepines, have anticonvulsant properties and are therefore useful for impulsive patients with episodic behavior disorders (Azcarate, 1975). Lithium has been found useful for emotionally unstable personalities and for aggressive patients as well (Sheard, 1975). Hormones have been used when aggression is linked with hypersexuality, but more work needs to be done in this area (Blumer and Migeon, 1975). Some investigators have reported beneficial results with central nervous system stimulants in patients whose aggressiveness is part of the clinical syndrome of hyperkinesis, particularly when that syndrome has its etiology in some degree of minimal brain dysfunction (Allen, Safer, and Covi, 1975). Disulfiram should be considered when alcoholism is consistently associated with violence.

Surgical treatment for aggression has received much criticism, but studies with good follow-up are not available in the literature. Stereotactic amygdalectomy techniques have been advocated by some workers (Mark and Ervin, 1970), but such an irreversible procedure can be justified only when all other treatment modalities have been exhausted (Goldstein, 1974).

The effective treatment of violence does not mean making the patient inert or impassive with medication, nor does it mean the snuffing out of all aggression in individuals. The goal of therapy with the aggressive patient is to help him effectively control his own aggression to the point where he can be, personally and socially, a useful member of society (Lion and Penna, 1974).



# Treating the Sexual Offender

*William R. Reevy*



Only a few states have special treatment programs or projects for the sexual offender. In a nationwide survey (di Furia and Mees, 1964), 294 mental hospitals were sent questionnaires, and 122 replies were received—all from hospitals that receive sex offenders. Of these 122 hospitals, 10 percent provide separate treatment for the sex offender, and 71 percent treat the sex offender together with psychotic or other patients. Where treatment in any form is found, group treatment generally is the treatment of choice.\*

The views expressed in this chapter represent those of the author and do not necessarily reflect those of the Bureau of Prisons or the U.S. Department of Justice.

\*A closely related area of treatment, the treatment of sexual deviates via the single case study, is not dealt with here. This form of treat-

### Model Treatment Programs

The special programs that do exist are all reputed to be effective, and certainly some in their conception are imaginatively different. At Atascadero State Hospital, in California, some of the activities in which the sexual offender participates are, indeed, creatively fashioned. Sexual offenders are committed to Atascadero State Hospital when they have been deemed to be a danger to others. Those committed are held in the hospital until a professional opinion is given that they will be no threat to others if returned to society.

The treatment activities at Atascadero are classified as within the Sexual Orientation Program (*Fact Sheet—Mentally Ill Offender*, 1977). These activities are designed to help the offender take responsibility for his individual improvement, including the attainment of self-discipline. In addition to such conventional treatment activities as didactic classes, exercise groups, "here and now groups," and group therapy, two unique treatment modalities are provided: sexual retraining groups (Serber and Keith, 1974) and consciousness-raising groups (Keith and Kuhner, 1973).

In introducing his sexual retraining groups for homosexual pedophiles, Serber, before his death in 1974, supported the position that homosexuality is not an illness. He argued that homosexuals have learned certain traits because they have been victimized by society as members of a minority subculture. These shortcomings or negative traits of homosexuals are not the result of individual psychopathology. Homosexual pedophiles institutionalized at Atascadero State Hospital are committed for having molested children and juveniles. These men, in general, feel inferior to adults and cannot relate to them adequately; therefore, they turn their attention to youngsters. In the past, the almost universal goal of therapists was to change a homosexual over to a completely heterosexual orientation. This goal of therapy, in Serber's view, is senseless; to support his view, he cited authorities such as Tripp (1965), who aver that there is no recorded instance of a homosexual's having been

---

ment is extremely well covered in the context of behavioral therapy under the general subheading of behavioral treatment of sexual deviancy. The best summary of such is found in Marks (1976). For other first-rate summaries see Bancroft (1974), Barlow (1974), Barlow and Abel (1976), Macindoe (1971), and Yates (1970).

completely refashioned into a heterosexual. Serber also contended that it is unethical to force one's own life-style and sexual preferences on another in as private a matter as sex and that what transpires sexually between two consenting adults is their own concern. Pedophilia, of course, is a different matter; but here, too, it is senseless to attempt to transform a homosexual pedophile into a heterosexual. Serber therefore set up what was for him a more realistic and attainable goal: helping the pedophile gain a different object for his sexual desire—a homosexual adult instead of a child or youngster. In his view, a homosexual's chances of coming into conflict with the law are much less if he is not a pedophile.

Following this reasoning, Serber established groups for homosexual pedophiles in which they would learn the social skills of relating to adults. He enlisted the help of gay college student volunteers who were functioning successfully in a predominantly straight society. These gay students were instructors after whom the pedophile could model behavior. A mock scene was set up, in which social contacts were made in a gay bar. The behaviors in making a social contact in a gay bar were separated out and role-played by the gays. The behavior was then imitated by the pedophiles in role-playing sessions. Videotapes of the role playing by the pedophiles were played back to them immediately, critiqued by the volunteers, and praise given for behavior role played well.

In other groups a gay female paraprofessional led consciousness-raising groups, where topics that homosexuals usually have difficulty in bringing out in the open were discussed—topics such as general problems in being gay, difficulties in finding work and keeping a job because of being gay, dealing with family members once they learn one is gay, and avoiding situations in which one might be arrested (Keith and Kuhner, 1973). In these groups, according to Serber, the techniques in evidence were much like those employed by rational-emotive therapists; that is, there was much information giving, challenging of faulty beliefs held by group members, and exhortation.

According to Serber, there was difficulty in starting the program because the pedophiles felt that this all might be a trap. They thought they were being asked to expose themselves and that they would eventually be forced to undergo severe aversive conditioning procedures for being a part of the program. Members of the gay community were also initially suspicious; they could not believe that any institution would genu-

inely want their help and therefore suspected that they would be used to expose the offenders. These fears on the part of both the gays and the pedophiles were overcome by concerted effort on the part of the program staff to show that their intentions were honest and that there would be no entrapment or exposure.

At Atascadero State Hospital, Serber (1970, 1973) also was the first to introduce shame aversion therapy in the treatment of sexual offenders. If a patient felt embarrassment because of his offending behavior, Serber enlisted his cooperation in acting out his deviant behavior in front of an audience of professionals and paraprofessionals. A voyeur, for example, who watched a female through a one-way screen, was himself watched by a number of mental health workers, who stood back of him in the same room. In the voyeuring situation, the voyeur masturbated as he would have in the live situation. Films were made in these situations and were used for reinforcement of the aversion.

In one study Serber (1973) reported that ten patients of varying types of sexual offending—including pedophiles, exhibitionists, and transvestites—received shame aversion therapy along with assertiveness training and training in social skills. Five other patients received only shame aversion therapy. Of the ten patients who received shame aversion therapy plus skills training, only two had repeated deviant behavior when checked in follow-up after a year. The five patients who received only shame aversion therapy returned to their deviant behavior within six months following therapy.

Another program that is operative and has unique aspects is the Sexual Offender Project established in 1966 at Western Washington State Hospital, Fort Steilacoom (MacDonald and di Furia, 1971; MacDonald and Williams, 1971). Washington State law allows courts the option of sentencing sexual offenders to the Adult Corrections System or to the specialized program for evaluation and possible treatment under the Sexual Psychopath Law. During a ninety-day period, individuals sent to the special facility are evaluated and undergo trial treatment. During this time, both the offender and the staff assess whether the offender has a genuine interest in changing his behavior and whether he will put forth the effort to do so. Immediately upon admission during this ninety-day period, the offender is assigned to a psychotherapy group. Within the first ten days, he writes his autobiography. He relates it to the group and is questioned

about its completeness and candor. Based on what he has stated in the autobiography and in groups, he is confronted by group members about his sexually deviant behavior. During this same period, the offender is examined psychologically, and his case is reviewed by the staff. Group leaders, program staff, and the psychologist decide whether he is a sexual psychopath or a person who is safe to be in society. If he is categorized as a sexual psychopath, they then must decide whether he will be a good candidate for the self-help program. The recommendations by the staff and group are reviewed by a senior staff committee, of which the hospital superintendent and clinical directors are members. The offender returns to court with the findings and recommendations, and the court may find him potentially treatable. If he is found treatable, he returns to Western Washington State Hospital for one year of inpatient treatment. During this period he is part of a psychotherapy group and may eventually become a leader of such a group. After a year of inpatient treatment, the offender may seek discharge as one safe to be in the community. If such a request is made, it is considered and voted on by his therapy group. It is then considered by the program staff and the senior committee. If his request is approved at all these steps, the offender may be sent back to court, whereupon the court may return him to the hospital for three months. During this time he must go to school or work forty hours a week and come back to the hospital at night. He also must participate in evening meetings and weekly outpatient meetings at the hospital. If he is now considered trustworthy, he may be given overnight leave with increased frequency and may go on to live full time in the community. For twelve months after being in community status, the offender must attend weekly outpatient meetings and continue his participation in hospital programs. Requests to quit may be granted by group, hospital, and parole staff.

While the offender is in a group and in the first phase of treatment, he is a member of a guided self-help approach; that is, group therapy for a maximum of twenty-five hours a week. The major groups are self-help in that the sessions are led by senior leaders who themselves are offenders. These leaders watch over and supervise the members' behavior and carry communications between group and staff. In addition to these self-help groups, inpatient groups are held. Men and women volunteers meet with these inpatient groups; the men serve as role models, and the women give the offenders an opportunity for

increasing their social skills. The offender is held accountable for mature behavior in six major areas of his daily living: (1) group living, (2) work, (3) psychotherapy, (4) social and recreational activities, (5) family relationships, and (6) constructive leadership of other offenders (Hall, 1971).

From the very outset of treatment, wives and children of offenders are welcomed to take part in the program. Weekly psychotherapy sessions are held for offenders and their wives or fiancées. Couples are urged to go to weekly dances at the hospital and to other social events at the institution. The offender and loved ones are also urged to celebrate holidays and special occasions as a family unit. Since 1971 a fully furnished cottage on the hospital grounds has been available on weekends to any offender who requested to visit overnight or for a weekend with his wife and family. Such visits must be approved by group and staff.

Another program, the Sex Crimes Program of the state of Wisconsin, has been run since 1970 by the Division of Mental Health at Central State Hospital in Waupun, Wisconsin. Asher Pacht (personal communication, July 19, 1977) writes: "The shift was made at that time because we felt that we could no longer run an adequate program at the Sex Crimes Facility [at Wisconsin State Prison] in Waupun. Inability to attract top-level staff to Waupun, Wisconsin, and trying to run a highly flexible treatment program in a maximum security institution were our major problems." No published literature reflects this change; hence, I am describing the program as it was conducted prior to the changeover, since it appears to have had much merit.

Since July 27, 1951, when the Sex Crimes Law was enacted in Wisconsin, all persons in that state convicted of rape, attempted rape, sexual intercourse or attempted sexual intercourse without consent, or indecent behavior with a child must be committed to the State Department of Public Welfare for presentence examination (Motz, 1954; Pacht, Halleck, and Ehrmann, 1962a). Within sixty days the department must complete a report presenting the findings of a social, physical, and mental examination to the court. If the report states that the sex offender requires special treatment, the court may commit the offender to the Sex Crimes Facility at the Wisconsin State Prison in Waupun for an indeterminate period; or the court may place him on probation, with the requirement that he receive inpatient or outpatient psychiatric treatment. If the report indicates that the offender does not need special treatment, the case is disposed of by the court under the criminal code.

If the offender has been committed to and received treatment at the Sex Crimes Facility, he may be paroled if a special review board so recommends. After the offender has served the maximum statutory sentence for the crime for which he was convicted, he must be discharged from department control—unless the department receives an extension in his case. Thus in a few cases sentencing for dangerous offenders may, in fact, be indeterminate. During the years July 1951 through June 1962, sixty-nine offenders had their commitments extended once; two offenders, twice (Wisconsin Department of Public Welfare, 1965).

After the case of *Huebner v. State of Wisconsin* (1967), where the department had recommended specialized treatment and the mandatory commitment was held invalid because due process had been denied the offender, the department formulated three criteria for use in its commitment recommendations: (1) The department will recommend to the court that an accused be recommended for commitment under the Sex Crimes Law if the crime was the result of sexual psychopathology and if the offender is considered either sexually dangerous or potentially responsive to treatment. (2) The department will recommend sentencing under the criminal code if the offender's behavior was not a result of sexual psychopathology or if the offender is neither potentially responsive to treatment nor sexually dangerous. (3) Since the statute directs that those who require specialized treatment for mental or physical aberrations be committed under the Sex Crimes Act, the department needed to define aberrations. It suggested that the trial judge look upon aberration as "sexual psychopathology, a type of mental disorder" (Jesse, 1967). The court is to view a sexual crime as one resulting from mental disorder of the accused. It is the department's experience that those offenders whose crime results from mental illness are best handled under the provisions of the Sex Crimes Act, while those whose crime is not a result of mental illness are best handled under ordinary correctional procedures.

The commitment provision of the Sex Crimes Act does not explicitly state dangerousness as a test to be applied, but other parts of the act refer to dangerousness. Dangerousness, for example, is given as the only matter to be considered in releasing the offender from control by the department. The offender is to be returned to the community only if the court finds that he would not be dangerous in public. The department has come to look upon as dangerous the offender whose deviant sexual conduct toward others is such as to cause physical or moral

harm. For example, if the crime involves violence or aggression or if there is an age difference between the offender and his young victim, the offender is considered dangerous.

In finally making a commitment decision, the department first determines the presence of a mental aberration. If mental aberration is found, a determination is made as to dangerousness of the individual. If the individual is aberrated and dangerous, a commitment under the Sex Crimes Act is made. If the offender is not dangerous, it is determined whether the offender is treatable; if so, he is committed under the Sex Crimes Act.

Once committed under the Sex Crimes Act, the offender is sent to Wisconsin State Prison, the receiving center for sex offender cases. (In cases originating in Milwaukee, use is made of Milwaukee County institutions.) After arriving at Wisconsin State Prison, the offender is administered a presentence examination, and then an indeterminate sentence is rendered. Upon return to the court with the recommendations of the department in the report, the offender is committed to the department for specialized treatment or sentenced as an ordinary criminal.

If the individual is committed to Wisconsin State Prison, treatment is started at once. Psychiatric therapy is begun and offered on a weekly or trimonthly basis. While at Wisconsin State Prison, sex offenders are not segregated from the other inmates, since the prison does not have a separate center solely for the treatment of sex offenders. (The department believes that treatment of sex offenders should be considered a medical problem and that sex offenders should not be handled in a strictly penal institution; however, Asher Pacht writes, in a letter dated July 19, 1977, that a special facility was never built.)

After an offender is informed of institutional regulations, classified, and given a job assignment, he enters a specific treatment program based on what has been found through diagnostic studies (Pacht, Halleck, and Ehrmann, 1962b). In an orientation group, staff members have an additional opportunity to assess the offender's attitude toward, and potential for, treatment and to learn what specific treatment should be given. In these groups, led by two members of the psychiatric staff, the basic principles of mental health are discussed, and normal sexual behavior is explained. The groups are conducted for ten to twenty sessions in a nonpunitive, nonblaming atmosphere. Whenever it is practical and when it is didactically effective, films are used and free discussion is encouraged.



After the foregoing period, offenders are offered some form of therapy based on their individual needs and personality structure. The range of individual and group therapies offered is from the supportive through insight therapies. For persons who are not amenable to personality change, treatment consists of strengthening useful defenses and providing education and emotional support. For offenders who are judged able to make personality changes, the goal of treatment is to provide the offender with professional help so as to gain self-understanding. With this insight he is able to resolve the impulsive sexual motivations that have brought him into conflict with the law. When the offender is sufficiently motivated to develop self-understanding and can tolerate the anxiety associated with such activity, the staff use techniques directed at uncovering unconscious material. However, free association is only one of the techniques used; others—for instance, those based on learning theory and Rogerian theory—also are employed. Expressive therapy also is used, but not with offenders who do not have the motivation to undergo an uncovering type of therapy or the ego strength to tolerate the anxiety produced by such therapy.

### Theoretical Approaches to Group Therapy

“Regardless of training, experience, or school of thought, there are probably as many different approaches in group therapy as there are therapists to deal with them” (Uehling, 1962, p. 44). At Western Washington State Hospital at Fort Steilacoom, the therapy is based on “the assumption that deviant sexual behavior is a learned phenomenon which becomes a habitual reaction to stress” (de Furia and Mees, 1963). As a developing child, the sexual deviate was reared without external control and, when he experienced stress, concentrated on sex as a source of gratification. His learned deviant sexual behavior became largely solitary and socially distorted. While learning maladaptive behavior, he was excluded from the opportunity to learn normal adjustive patterns and therefore did not develop heterosocial and heterosexual skills. Treatment at this institution is based on learning theory. In group therapy attention is directed to overt behavior rather than “underlying motives, symbolism, psychosexual development, regression, fixation, or castration anxiety” (di Furia and Mees, 1963, p. 5).

When the program at Wisconsin State Prison was in existence (with Seymour Halleck as chief of psychiatric services of

the Division of Corrections), therapy was largely based on psychoanalytic theory. The therapists accepted the theory of the unconscious determinants in the motivation of behavior and hence made use of psychoanalytic techniques in the conduct of therapy. Free association was extensively employed but was supplemented by a variety of techniques based on client-centered theory and learning theory (Pacht, Halleck, and Ehrmann, 1962b).

Mathis and Collins (1970a, 1970b, 1971), in their treatment of exhibitionists, made use of a male therapist as leader and a female as coleader. The male therapist took the leading role without being harsh, overbearing, or punitive. The female cotherapist was relatively "passive but not obsequious." She was kind but not seductive and not responsive to seductive maneuvers. With the use of cotherapists, one male and one female, a family setting was recreated where appropriate parental behavior was modeled by the therapists. The therapists deport themselves much in the reverse of the parental pattern that the exhibitionists had experienced with their parents or parental figures. That is, since exhibitionists often were reared by a passive, nonmasculine father and a dominating mother, the male therapist was assertive and masculine and the female therapist relatively passive. Group discussions centered around current interactions in the family, social, school, and work environments. The relationship of these interactions to the impulse to exhibit also was discussed. For example, the exhibitionist whose impulse to show his genitals typically occurred after he had been frustrated by his wife (or girl friend) was helped to see that his deviant act was related to a breakdown in communication between him and his wife (or girl friend).

At the outpatient clinic at Philadelphia General Hospital, Peters and his coworkers conducted an open-ended group therapy, in which peers confronted peers about their deviant behavior (Peters and Resnik, 1967; Peters, Pedigo, and others, 1968; Resnik and Peters, 1968; Peters and Sadoff, 1971; Peters and Roether, 1972). They found that a major mechanism in offenders is denial of the deviant behavior. Peers, they discovered, have more success in breaking down this mechanism in offenders than a professional has in a one-to-one interview. Group therapy gives offenders an opportunity to discuss similar problems with peers. The fact that people with like problems get together in a group makes it less difficult for the offender to discuss deviancy, and he becomes involved with others. The suc-

cessful entering into the group involvement leads to improvement in the offender's self-esteem and his relating with others.

At Western Washington State Hospital, as was pointed out before, sexually deviant behavior is viewed as learned (di Furia and Mees, 1963). Therapists at Fort Steilacoom say that the sexual deviate, through his sexual behavior, exploits others for gain (di Furia, 1966). This exploitation is but a smaller part of a more generalized pattern of exploitative behavior. In groups the members identify the offender's pattern of taking advantage of people sexually and discover other patterns of exploitation in the offender's history. Then they show him the relationship of his patterns of deceitful activity in sex to his patterns of exploitation in other areas of life. With the group members helping him to recognize his methods of exploiting people, the offender can learn ways of dealing with stress and frustration that are socially acceptable and adjustive. At Fort Steilacoom the group members exert social pressure to force the offender to conform to standards (di Furia, 1966): the rules of the hospital, the requirements of his group, and the rules of society.

At Wisconsin State Prison, the group therapy is seen as a process that unfolds in three phases (Pacht, Halleck, and Ehrmann, 1962b). During the first phase, which may last from several months to a year, the individual is helped to examine his behavior objectively and thus give up his defensiveness and self-punishing activity. Within the group itself and in the total environment, an atmosphere is created where the offender can build a therapeutic relationship with the therapist. Once a therapeutic relationship is established and the offender has dropped his defensiveness, the second phase—the phase of “working through the nuclear conflicts”—is entered. Therapy now focuses on factors that have contributed to the individual's developing deviant patterns of behavior. At this phase a great deal of time is spent in looking at the day-to-day interactions of the offender with others in the prison. Incidents which occur in the everyday living are pointed out as being in the same pattern as the self-destructive behavior which brought the offender to incarceration. In the last phase of therapy, problems of separating from the institution and planning for the future are dealt with.

In their treatment of exhibitionists by group therapy, Mathis and Collins (1970a, 197b) learned that in the initial phase (which lasts from four to six months) the offender cannot come to terms with the fact that he is an exhibitionist. He

denies the act, or says that it is not abnormal, or even defends it as an act of "manliness." At the beginning of therapy, the exhibitionist stays aloof from others and denies any need of interacting with another human. At this stage attendance at group therapy should be forced, and the therapist should offer no explanations or interpretations, since such efforts would make the exhibitionist's denial stronger. This mechanism eventually is broken down by constant confrontation from group members. In the second phase the exhibitionist begins to admit that he is emotionally immature in part. He further sees that his immaturity causes him to be self-destructive. In this phase he overidealizes the leader and group members, believing them to be all-powerful persons who can save him. The experienced group members interpret matters to him realistically and deflate his overevaluations of them and the leader. In the third phase the exhibitionist expresses anger—at first against the law and society but later against group members and the leader. Expression of anger against members and the leader is accepted and paves the way for expressions of anger against the important females in the patient's past history: mother, wife, girl friend. The fourth phase is the phase of disappointment. After the inmate has lived through the fear that the anger of the previous stage might overwhelm him, and sees that he has survived, for a short time he experiences self-esteem for having been strong and masculine in expressing anger directly against the significant females in his life; but since the urge to exhibit himself is still present and felt, he may be disappointed in himself for harboring the impulse. The therapist and other group members point out to him that the urges now are conscious and that he can control them; therefore, he is growing. During the fifth phase, which lasts several months, the exhibitionist usually experiences an upward turn in his work situation and feels considerably encouraged. The sixth and final stage is separation from the group. Just prior to separation, after having a feeling of growth in self-esteem because of the previous progress, the offender now verbalizes personal attachment for his peers. He feels better about himself and now can feel better about others. Usually this has been the first time that the exhibitionist has become attached to anyone, and he feels some hesitancy in detaching himself from the group.

Peters and his coworkers (Peters and Resnik, 1967; Resnik and Peters, 1968) found that in the initial phase of group

therapy the therapist is regarded as an arm of the judiciary and police. Hence, in the beginning the offenders are evasive, guarded, hostile, or negative. To set himself apart from the punitive aspect of the law and authority, the therapist may agree with the offenders that the law, police, and society do, in fact, have certain stereotyped attitudes toward the offender. The therapist is accepting of the hostility that the offenders display toward the institutions of society and likewise toward him. As the hostility is turned away from the institutions of society and becomes focused on the leaders, the offenders question the therapist's motives for being with them. Peters and his colleagues were able to weather this mistrust of them by explaining that they were present to help the offenders, that they were paid a fee for professional services but were not a part of the court and did not depend on this fee for a livelihood, and that they did not relay confidential information to the court.

In the second phase cohesiveness develops among the group members as they recognize their similar problems and their common dislike of representatives of law. Older and newer members of the group accept each other as peers, and members become rivalrous. Through being rivalrous and through feeling accepted, members are drawn into discussion with each other. Older members now challenge the newer members when they deny the acts for which they were convicted; consequently, the new members are led to admit their deviant acts, thereby assuaging their guilt. After the defensiveness expressed by previous isolation, detachment from others, and passive-aggressive behavior is reduced, group members are able to express a great deal of aggression within the group. This toleration of aggression gives rise to frank, reciprocal discussions about sexuality. Once this point is reached, there is an honest and detailed exposure of the relationship of offenders to their wives and other females or, in the case of some pedophiles, to stepchildren. In some instances the offender comes to recognize his wife's subtle role in his crime (Peters and Resnik, 1967). The therapist who has withstood the initial mistrust is more and more seen as being on the offenders' side and becomes more able to influence their attitudes.

The ending phase of treatment shows itself in a change in behavior and attitudes toward both peers and authority. Group members became more friendly toward peers, the therapist, and probation officers and less hostile to authority.

### Common Characteristics of Offenders

According to what was observed clinically at Western Washington State Hospital, offenders as a group share certain characteristics (di Furia, 1966). Most notably, offenders as a group have major difficulties in relating interpersonally with others—probably because they felt unloved as children. They never had been in a close, warm relationship with another person where a healthy give-and-take relationship had existed. Instead, they were left with strong dependency needs as their basis for relating to others. As adults they are rigid in their way of adjusting to the environment. Most of them view sex as dirty and disgusting; only after extensive experience within the group are they able to say that their deviant sexual behavior was motivated. They then admit that in committing their sexual offenses they experienced pleasure and other feelings, such as excitement, revulsion, guilt, or revenge.

In the opinion of the Wisconsin therapists, sexual offenders as a whole usually lack an intact personality (Pacht, Halleck, and Ehrmann, 1962a) and have few "ego strengths." Their life histories reveal emotional deprivation and severe trauma in childhood. As adults they function inadequately in the world of usual society, and their deviant sexual behavior satisfies unhealthy needs of passivity, ruined self-esteem, and a need to be fed in a figurative sense.

Through observation of exhibitionists in groups, Mathis and Collins (1970a, 1970b) found that they are underachievers who rarely reach their potential to rise in the socioeconomic world. They have a low tolerance for anxiety, so that their emotional involvement in everyday living is constricted. Hence, they have very limited experience in interpersonal relationships and a narrowed personal view of their role in society. Usually the exhibitionist holds within him a fear that his infantile rage will overwhelm him if he expresses anger. Hence, his anger is usually kept unexpressed. However, the impulse to exhibit can usually be predicted, since the behavior most often follows a blow to his self-esteem, engendered by a frustrating experience with his wife (or girl friend). Most exhibitionists lack self-confidence and normal masculine aggressiveness and tend to feel inferior to other men.

Resnik and Peters (1968) found that sexual offenders usually have controlling, sexually aloof wives who played a part in helping the offender commit his crime. One wife, for exam-

ple, placed an 11-year-old daughter in bed between her husband and her, so that she would not be "bothered." These investigators found that most offenders—homosexuals, pedophiles, and exhibitionists—fear women and that, of all offenders, homosexuals are the least likely to get in touch with their repressed feelings about women. Hence, they are the offenders who most easily continue their behavior.

Where pedophiles are concerned, the pedophilic acts are commonly preceded by sessions of drinking, after a wife or girl friend did not gratify their sex wishes. The alcohol lowers the pedophile's control; he regresses in behavior and then contacts a child as a sexual object, since the child is seen as less likely to reject his sexual advances.

Peters and Roether (1972) see sexual offenders as psychosexually immature and socially isolated people. According to them, most deny guilt and involvement in the alleged crime. Both exhibitionists and pedophiles are passive people, but the former are more passive than the latter. Further, these investigators found an especially punitive and harsh superego in both groups.

Resnik and Peters (1968) found passivity, fear of women, and aggressive drives as the common characteristics in all offenders. Most of them measure their masculinity by show of external possessions rather than by "internalized ideals."

### Treatment of Assaultive Offenders and Rapists

A number of authorities have written about the need for study of the assaultive, dangerous criminal and have noted that few items dealing with such felons appear in print (Halleck, 1967; Heller, 1969; Kozol, 1972). In Kozol's (1972) view, the personality traits that cause dangerousness in behavior are common to all classes of assaultive behavior. In his opinion, "there is no basic difference between the man who kills to rape or the one who kills to rob." Whether or not one accepts Kozol's premise, one finds as little research dealing with the criminally dangerous sexual offender as one does with the dangerous criminal. One promising treatment program, however, has been undertaken.

Abel, Blanchard, and Becker (1978) have described in detail their integrated treatment program for rapists. Recent federal funding for the program has made treatment available to rapists or potential rapists free of charge. Treatment is offered

completely on a voluntary basis, and the person seeking treatment must not be doing so because the legal system or the courts have ordered him to be treated. At any time after the start of treatment, which is kept completely confidential, the patient is free to stop without being subject to any adverse consequences. The program has been in operation for an extremely short time, and treatment results are not yet reported.

The components of the treatment program were arrived at after a decade of research by Abel, Barlow, and colleagues (1977). In their estimate, the integrated treatment program for rapists might well serve as a model for the treatment of all types of sexual offenses. Their model does seem to be the most comprehensive model presented to date and might well be emulated in any facility embarking on a treatment program. Hence, parts of the model will be set forth in some detail later.

In their review of the treatment programs dealing with the sexually aggressive rapist, Abel and his coworkers found that five treatment components can be identified: (1) an empathic relationship is created between the offender and the therapist; (2) an outside party confronts the offender with his sexually deviant behavior and requires him to take responsibility for that behavior; (3) the offender is trained in heterosocial skills, such as the skills involved in dating women; (4) the offender's arousal to rape cues (his urges to rape women and young girls) is reduced; and (5) the offender's arousal to heterosexual adult women and normal sexual acts with them is increased.

According to Abel, Blanchard, and Becker (1978), whether the form of treatment for the sexual aggressive is pastoral counseling, psychoanalytic therapy, milieu therapy, or group therapy, a warm and accepting relationship must exist between the therapist and the patient if the therapy is to be successful. Thus far, only the clinical impressions of therapists give validity to the foregoing notion, since there are no controlled studies on the subject.

The ways in which rapists are confronted about their offending sexual behavior, and how they are required to take responsibility for these acts, vary from the directly aggressive confrontation to the subtly indirect. However, confrontation is a common element in all forms of treatment. In the ROARE program (Reeducation of Attitudes and Repressed Emotions Program, Special Treatment Unit, Rahway, N.J.), confrontation is through the marathon experience itself. Here each person,



including a staff member, is on an equal plane with each other person (Brancale, Vuocolo, and Prendergast, 1972). Staff do not function as authority figures but participate with the offenders in a free-for-all atmosphere and have only one right that offenders do not have; that is, a staff member may stop the group activity when the expression of emotions is becoming too intense or when a group member is approaching a psychotic state. In such an atmosphere, confrontation is of the most direct sort. After a twenty-minute recess, a videotape of the session is played. Inmates now must evaluate themselves and must explain what memories set off emotional catharsis. They try to understand how repression of the memories which were regained in the session affected their past life and had a part in keeping their present problems in existence. In ROARE, offenders are confronted twice—once during the main session itself and again in taking into account what they see about themselves on videotape.

Most behavioral therapists require that the offender accept responsibility for his behavior, including the sexual, before he enters treatment. They also demand that he agree to participate actively in the treatment which he undertakes. Once the offender is in treatment, the behavioral therapist confronts the offender with what his actual offenses and sexual behavior are and have been. Psychoanalytically oriented therapists face the patient up to his behavior in a less direct way. His unconscious motives for raping are explored. Then he comes to know what his unconscious motives are, to accept the fact that these motives are his, and, in turn, to gain rational cognitive control over them.

By indirect or direct means, the sundry forms of therapy teach the offender social interaction skills which help him in communicating with and relating to females. Group therapy gives offenders the opportunity to learn to converse with females, to overcome hesitancy in relating to them, and to be at ease in their company. By relating to women in the semisocial context of group therapy, the offender gets emotional support if mistakes are made.

Pacht (1975) attempted to help inmates acquire heterosexual skills by requiring them to make dates with the female secretaries, clerks, and aides at the prison. His description of exactly what these dates involved and how the social skills were taught and acquired is sketchy. It seems questionable, however, that such a program could be effective in such a setting. The

concern of custodial personnel with the security of the institution makes them suspicious even about normal tête à tête talk between inmates and staff and leads to situational paranoia when sexual urges seem to surface in the relationship between inmates and female staff. Furthermore, although Morris and Jacobs (1974) approve of a romance developing between an inmate and a female staff member, such a relationship usually means trouble for the staff member and jeopardizes her job.

*Decreasing Arousal to Deviant Cues.* The research of Abel and his coworkers has validated the notion that rapists are aroused mainly by young girls; when they are aroused by adult women, it is principally when they are thinking about hurting them or aggressing against them. Psychoanalytic theory holds that rape occurs because the rapist has a specific phobic fear of the female genitals—for example, the unconscious fear that the genitals are castrating teeth. In counterreactive response to this fear, the rapist aggresses against the female. In both the behavioral therapist's view and that of the psychoanalyst, rapists are understood to have inappropriate heterosexual arousal to normal cues and contexts (such as consensually agreed-upon, mutually satisfying intercourse) and excessive heterosexual arousal to deviant sexual cues.

All treatment modalities and programs attempt to decrease the arousal to rape cues and contexts. Group therapy programs decrease sexual arousal to rape situations by allowing the patient to experience an emotional catharsis about his past experience in rape. The offender is also confronted by others and forced to bring his sexual offenses and behavior into the open, to describe them, and to admit them as his. Psychoanalytic procedures help the offender gain insight into the reasons for his phobia of the female genitals and to learn to change his counterphobic aggressive behavior directed toward the female's genitals and the bodies that house them. In gaining insight the rapist will gain rational control over his deviant behavior. Behavioral therapy approaches decrease sexual arousal by the methods of aversion, systematic desensitization, social retraining, classical conditioning, masturbatory conditioning, and fading and shaping.

*Treating Deficits and Excesses.* According to Abel and his coworkers, the rapist (as well as other sexual deviates) shows behavioral excesses and behavioral deficits, and excesses and deficits in sexual arousal are measured by various physiological techniques (Abel, Blanchard, and Becker, 1978). The magnitude

of the erection of the rapist's penis is measured by use of mercury-filled or mechanical strain gauges. Response to the presentation of rape scenes as presented by means of audiotape, slides, videotape, or free fantasy as modalities is measured, as well as penile response to scenes where rape is not the content. When the cue presented was in the form of audio description of rape or mutually enjoyed heterosexual intercourse, the rapists show the same magnitude of erection to both types of stimulus cues. The nonrapists showed significantly less erection to the audio descriptions of rape than they did to the mutually enjoyable intercourse. The nonrapists showed the same magnitude of erection to the audio descriptions of mutually enjoyable intercourse that the rapists did to both types of cues considered together (Abel, Barlow, and others, 1977).

For Abel such quantitative measures give valid evidence of the rapist's behavioral excesses and deficits. That is, rapists evidence arousal deficiency in response to usual heterosexual cues and excessive arousal to deviant sexual cues or aberrant type scenes.

Once excesses are determined as above, treatment is instituted to diminish or abolish response to rape cues. The behavioral therapy techniques most often used are aversive conditioning and covert sensitization. These techniques are best described for the general reader by Serber and Wolfe (1972).

In aversion therapy some type of noxious stimulus—such as electric shock or, less frequently, a noxious chemical or an unpleasant odor—is paired with the representation of some deviant behavior in a chain of behaviors progressing toward the final criminally offending behavior, the rape itself. The aversive stimulus may be paired with any type of deviant cue with a rape content: photographs of rape, slides depicting rape, narratives of rape, videotapes of rape, and, theoretically, real-life behavior. Where a diminution of rape behavior is sought, an aversive stimulus might be applied when slides of rape scenes are presented; that is, upon any evidence of penile erection in response to the viewing of a slide depicting rape, shock is applied.

In covert sensitization the rapist is first helped to present a sexually arousing mental image to himself, and the image later is paired with an aversive mental image. Abel, Blanchard, and Becker (1978) give an extremely detailed step-by-step account of the voluntary treatment of a rapist through the use of the behavioral therapy technique of covert sensitization. The case presented is based on an extensive study of the individual's rape

history, principally through his recounting of the actual details of his rape behavior. In the particular case presented, it was learned that on three separate occasions the patient, while a soldier in Thailand, had raped a woman anally. Upon his return to the United States his fantasies of raping increased, and his urges to rape became uncontrollable. When they became thus, he followed a female clerk from the store, broke into her home, and knocked her unconscious. He was on the way to raping her, but he stopped when he noticed that she was bleeding from the wound he had inflicted.

In treating this patient by means of covert sensitization, the therapist unearthed all the fantasies and behaviors that took place in the three rape situations overseas and the near rape in the United States. The therapist stimulated the patient to imagine each behavior link by link from the starting point. This particular patient's clinical history revealed that his raping usually occurred after he had been drinking, so the therapist would stimulate the patient's imagery by saying something like the following: "You have been drinking. You are in a car now. You are driving around. You are thinking about Mary. Imagine what she looks like. Nice tits, nice legs, nice ass. What an ass! It's really nice. You see her ass. You're thinking of climbing on her nice ass. Feels good." The offender is stimulated to imagine details of the rape point by point as revealed by his case history. There is much repetition of imagery of behavior that arouses him sexually.

The aversive imagery which is to be paired with the foregoing imagery is chosen by the rapist himself. In this case the offender revealed that the most aversive mental picture he could imagine was that of his wife being raped while he himself was in prison, and of her subsequently becoming mentally ill because of being raped. Helping the offender imagine the aversive scene might start with the therapist saying: "Three men have your wife. You are lonely and miserable in prison when this happens. Two of them are holding her down. One's holding her legs. One is pulling off her pants. The third guy pulls out his penis. These guys tell your wife they are doing this because you raped a sister of one of them. They are out for revenge. She screams. Nobody is there to help. She pleads that you were drunk when you did it, didn't know what you were doing. That doesn't stop them. The one guy begins to climb on. All three are raping your wife because you raped Mary."

In treatment sessions sexual arousal is initiated by the

rape fantasy where the offender imagines the pleasurable rape scene; after arousal occurs, the offender is helped to switch his imagery to the aversive scene. Abel states that in fifteen to twenty sessions of covert sensitization there should be significant diminution of arousal to the deviant rape scene. If there is not, he advises switching to other aversive techniques.

### The Prison Psychologist: A Personal View

The first hurdle for a prison psychologist to overcome is that of dealing with the suspiciousness of administrators and the passive-aggressive interference of custodial staff and some administrators. Many times one is not successful in overcoming these resistances, but one should try. The initial step for one at the bottom of the political power base (the usual position of a staff psychologist in a prison) is to ingratiate himself with the administrative authority. It is difficult to do this and retain one's professional integrity, but in some instances it can be done—if one exerts unending patience and works, at first, considerably below his professional expertise. In one instance I did psychological examining, and little else, for a year, waiting for a chance to free the warden from extreme difficulties with a psychotic inmate. The opportunity came when the inmate had broken an officer's jaw. The administration wanted to know whether the inmate was psychotic so as to effect his transfer from the prison. In dealing with such an inmate, the psychologist usually is locked in a cell with the individual so as to administer the psychological examining devices. When administrators and others see that one is involved so directly in dealing with severely psychotic individuals face to face, individuals whom they themselves fear, they acquire a certain respect for the person who can do what they cannot; that is, talk to a psychotic without being overwhelmed by fear and anxiety, without being assaulted, and without escalating the patient's symptomatology. If one does not retreat from such face-to-face service work and if one can arrange to see the administrator, one might be able to sell himself.

When working in a prison to start something viewed as potentially threatening, and therapy is viewed that way, one must have unending patience, persistence, sensitivity, and a measure of realistic stoicism (or is it masochism?). For example, the psychologist may have to contend with the vituperative maligning of his character when paranoid schizophrenics or

ingratiating, lying sociopaths leave a therapeutic group. In a prison environment an inmate, unless obviously psychotic to all, can get immediate emotional support for his distorted expressions within minutes after he leaves a session. Sometimes the support comes from an administrator who knows nothing of concepts like displacement, transference, and counterreaction.

Actually starting the group therapy program is a different activity from developing administrative support. The therapy should be on a volunteer basis, but one must be careful that the inmates are not volunteers in name only. Not all of the inmates want to enter the group in order to undergo personality change. Many inmates have curiosity about psychologists as such. Others want to learn about group processes and about leadership, so as to manipulate other inmates and staff. The meeting time of the therapy group may give some inmates an opportunity to get away from an objectionable or boring routine elsewhere. Some may want to learn about the secrets of others. Some, in this day of equal opportunity, may find it an enjoyable opportunity to be with a shapely, seductive female psychologist or female counselor rather than in food service dealing with pots and pans. If one is to begin a therapeutic group, it is best to screen out people who have nontherapeutic motives. Assuming one has done this successfully, one has, on the surface at least, a group of people who wish to return to society knowing more about themselves than they did when they entered prison. If one has eight or ten individuals, the group process starts.

In many respects the group process has much in common with what Peters has found. The first phase is distrust. At the outset the inmates distrust the therapist because he is one of those persons on the other side of the desk, a representative of the punitive legal system, one of the policemen, a tool of the institution. And, unlike Peters, the prison psychologist cannot say to the offender that his salary and promotion do not depend on what he does inside. There is paranoia that the therapist might be an informer who carries information forward in order to secure promotions. As the group sessions begin, the inmates watch the therapist carefully, to see what biases, if any, he has. Does he talk only to blacks or only to whites? Or only to people in status above him? How does he conduct himself in everyday actions? Does he often come and go in and out of certain offices, particularly the administrative offices? If so, he can be sure that some inmate on an outside work detail or in the business office will let the word out that he is not doing therapy but is only interested in control.

While all this is occurring behind the scenes, within the group there will still be distrust. Just as Peters indicates, the group members will want to know what the therapist's motives are and what sort of person he is. They cannot believe that he wants to help them; their common sense tells them that if he were competent he would find a better job or, for example, go into private practice. And so there will be attempts at probing and questions asked. A man whose wife has divorced him is writing threatening letters to her, though she is happily married to another man. He wants to know what the therapist would do if he found his wife in bed with another man. The therapist deflects the question to the group, stimulating them to ask him whether he has had that problem. But, unlike what one would do in private practice, he cannot deflect this question forever. Somewhere during the hour, he tells the group that if this were to happen in New Mexico, he might assault the man—because in New Mexico no man has ever been sentenced even for shooting a man when he caught his wife in adultery. This answer is calculated to show the group that the therapist is practical and has common sense. The group members then go on to something else. They know that the therapist doesn't smoke, so they ask him if he smokes marijuana. He answers that he doesn't because it is against the law but that he can smell marijuana when others are smoking it. They say that a lot of marijuana is coming into the prison. He tells them that he doesn't want to hear in the group about rules being broken, since he doesn't want to take information up front and won't. There are two exceptions: if he learns that a killing is being plotted, he will attempt to protect the intended victim; and he would tell the administration if he heard of a planned escape.

After a time—after planting some traps and after discussing the matter among themselves behind the scenes—the group members begin to trust the therapist somewhat. But they continue their testing. If the therapist is not defensive and actually does not come to the defense of all the institutions of society but in fact, to a degree, agrees with the inmates on certain truths, therapy will proceed. It is actually true that for the same crime committed the relatively same type of person can be sentenced to much less time by a liberal judge in California than a conservative one in North Carolina. That is an injustice in our legal system. Some wardens run a prison dictatorily, as though they were feudal lords of the Middle Ages and as if the prison were their fiefdom. Staff members have diverse reasons for entering prison work; and some are uncultured, like to talk vul-

garly, and couldn't make a living in the outside world. But the prison is a microcosm of the society outside. Not all inmates are boorish, unintelligent, and deceitful; and neither are all staff members.

The mistrust of legal authorities, administrators of the prison, the classification team, and the therapist moves somewhat in an orderly process and sequence from mistrust of the judicial system on through to the therapist. Although the stages overlap and are not clearly demarcated, if the therapist allows the offender's mistrust of the legal authorities to be expressed without defending the legal system, the offender will move on to show his mistrust of local authority. When he gets to this stage of expression of his feelings, most therapists might have internal conflicts, since anger is being expressed about authority figures to whom the leader is in a subordinate relationship. At this point the therapist might avoid the issue by shunting the offender to another topic or defending authority or himself, evidencing countertransference with authority. If the therapist avoids the issue, defends authority, or berates authority himself, the therapeutic process is hampered. Likewise, where the classification team is concerned, he may be made uncomfortable by having his team workers berated and might shunt the topic to a less anxiety-producing one; or he might defend his colleagues; or, if a colleague is a threat to him, he might make the mistake of joining in the onslaught. The same dynamics will become involved when the therapist himself becomes the focus of the mistrust. He may not allow the inmates to discuss what they think of him, he may get defensive, or he may counterattack and get locked in an emotional battle as if he were being rivalrous with a sibling.

If the leader allows the mistrust to be verbalized at each of the foregoing stages and expression of anger toward each target, anger will be ventilated. From this point on, the offender will narrow his field and now focus on parents, siblings, and wife or girl friend, expressing how each important figure in his family circle has betrayed his trust, let him down, caused him to experience emotional trauma, or in some way, according to his perception, caused him emotional suffering. He expresses his anger in relation to each of these important figures and is able to move on to expressing, in turn, how he himself let others down, betrayed them, and is causing them emotional problems; he then sees that his interpersonal relations are not as desirable as they might be. He also expresses disappointment in himself because he lacks the capacity to direct his life.



A stage in group therapy of offenders which has not been dealt with systematically remains somewhat theoretical at this point; that is, the stage where some offenders are ready to analyze their crime or offence. They can move on to examining their crime against society, their deceptiveness in interactions with local authorities, and their failure to observe the rules of the therapeutic group. At each of these stages, there should be systematic and direct confrontation about breaking the rules, so that the offender can then move to reveal to the group how he has broken rules in living with his parents, siblings, and wife. At this point the offender should be emotionally ready for full participation in educational programs, which would give him the skills necessary for earning a living on the outside.

# Treating the Violent Law Enforcement Officer

*Harvey Schlossberg*



Over the past three decades, our society has undergone many major social and political changes. Sociologists and other social scientists have not yet fully evaluated the impact of some of these changes and social movements, such as the Vietnam War and the efforts to obtain equal rights and opportunities for women, homosexuals, and blacks. With these developments, increased pressure has been brought to bear on the functions of large urban police departments. In their efforts to cope with terrorists, mass murder cults, and violent activist groups, the police have been thrust into global, seemingly unresolvable, issues of human rights and political dissension. As a result, they are experiencing deep inadequacies, alienation, frustration, and conflict. These feelings are heightened by intradepartmental ambiguity, conflict, and lack of absolute guidelines, as well as by public antagonism, distrust, and resentment.

Perhaps some light is shed on the problems faced by police when we examine why police as an institution came into being. In the early nineteenth century, police work was a function of the military. Military men, however, generally lacked an understanding of the problems surrounding crime and viewed themselves as separate and apart from the population they served. The police concept was introduced as a kind of intermediary step between the military and the civilian population. The idea was that complex criminal and social issues of the community should be dealt with by people indigenous to that community. Recruitment for the police force was initiated at local levels, and training indoctrination was established in accordance with the concept of serving rather than controlling. Often a policeman was called upon to act as a referee on issues that he might have had some stake in as a citizen of the community. Consequently, although he might personally favor a particular point of view, he was required to remain detached and impartial. However, because of the entrance standards and lack of formal educational requirements for the job, the officer was often ill equipped to separate the varying points of view in an impartial, unemotional manner. He therefore found himself at odds with large segments of the community. The criticism he received created guilt and self-abasement. He responded with feelings of anger and depersonalization and would often overreact in his constant effort to elicit some praise or reward from at least one segment of the community. Rationalization became the defense mechanism best designed to hold the personality intact, in the face of demands, actions, and thoughts that did not match.

In modern times the amount of conflict has been greatly increased by the shrinking of the world through mass media communications and transportation developments. In any police situation, the resulting action is an interplay of the personality characteristics of the individuals involved and the environmental determinants which structure the event. Aggressive action often becomes an attempt to establish authority and impose will. The police role incorporates this philosophy as a way of maintaining the social system. It calls for the police to apply force in varying degrees and in a variety of situations to settle disputes and obtain compliance. The police officer can become the object of displaced dissatisfaction with all authority, so that the reaction to the force he applies becomes more violent and extreme, resulting in an escalation of violence. Aggression and force, then, are not abnormal reactions by policemen

but fall well within what is socially expected of them. Violent behavior—the use of more force than is required by stimulus inputs of the situation—must be viewed as an extension of normal behavior in the arena of police work. It is the consequence of the personality of the policeman in response to the situation and the personality of the antagonist.

In many instances the policeman is confronted by what could be considered the equivalent of a projective test. He is faced with an array of ambiguous events from which he must create a complete story involving what the others are thinking, what led up to the situation, and what direction it will take. When he puts all this together, he will have to take some action, which may involve the use of authority; consequently, implied or actual force will have to be exerted. Since his estimate of the situation depends on his personality needs, there may be some element of misinterpretation, which can become heightened by the others involved; thus, the force applied might be excessive or inappropriately directed. The result is a violent police officer. In short, we are not dealing with a cognitive or other psychiatric disturbance but rather with a transient misperception. Contributing to the misperception is the nature of the criminal justice system itself, which the policeman may regard as unfair and operating as a revolving-door reality. When a decision is made which the policeman interprets as inappropriate or improper, he begins to feel that his work in capturing criminals is meaningless. Therefore, he begins to extract his own form of justice, so that he can see a finished product and feel a sense of accomplishment.

Recognizing that the policeman is no different from any other individual, in that he must deal with his own sexual and aggressive urges, we can make a distinction between hostility, aggression, and violence. Our focus is on observable behavior, as opposed to theoretical issues; the appropriateness of the behavior in a work situation is what we consider important. First of all, we can regard aggression as a fundamental human drive. However, aggression seems to become violent and hostile when it is mixed with hatred and fear—at which point it can be expressed in behavior designed to cause injury or total destruction to another. It is often difficult to identify police officers who are violent, because most violence occurs in a situational context and must be analyzed from both a quantitative and a qualitative point of view. For example, the more incidents a policeman is involved in—and, therefore, the more active a policeman

is—the more likely he is to misperceive an event and, consequently, to use excessive force. Ironically, the more productive a policeman is, the more likely he is to become involved with violence.

Many officers have developed ways to redirect this potential for excessive force. Some of the modern techniques that are taught—such as crisis intervention and psychology—attempt to aid the policeman in dealing with hostile and fearful feelings before they arise. Other techniques, such as role playing and interaction workshops, are designed to help him understand the potential for misuse of force. For some officers, however, these techniques have proved inadequate. That is, these officers recognize the consequences of excessive force but are unable to devise successful means for handling them. If they internalize their hostile feelings, their lives become chaotic—replete with accidents, self-inflicted injuries, suicidal thoughts or acts, excessive absenteeism, and inability to maintain meaningful interpersonal relations. The policemen who have selected these methods for redirecting their potentially excessive force never really come into treatment directly. There is little pressure for them to do so because the symptoms are not public. Frequently they will surface for marriage counseling, alcohol addiction, or feelings of depression and dissatisfaction. Their treatment consists of conventional individual psychotherapy and/or marriage counseling techniques.

In contrast to the internalization method of dealing with excessive force, an officer can directly act it out and thus become the object of public outrage. It is for this policeman that we have developed a means of identification and intervention, with the realization that such an officer has a potential for destructiveness but also for superior performance.

The process of identification is relatively simple but requires many inputs to be coordinated. The New York City Police Department has set up an early-warning system. Briefly, every policeman's performance is continually monitored by the performance evaluation unit, which has the responsibility for early warning. For each individual, the evaluation unit routinely monitors information on number of civilian complaints, type and extent of force used to effect an arrest for which a complaint was made, number of times firearms have been discharged, number of arrests, complaints from family and in general supervisors' quarterly evaluations. This process represents an ongoing and continual gathering and equating of data.

When an individual surfaces because he has met or passed certain criteria—for instance, a firearm discharge or a civilian complaint alleging brutality—his record is completely reviewed by a panel, which considers the circumstances of the situation and possible justification for the actions. The panel's recommendations can vary from having the individual interviewed by a commander to establish whether there were any unusual circumstances needing further attention, to suggesting a psychological evaluation.

The psychological evaluation usually consists of a complete battery of projective tests in addition to a psychiatric consultation. If there is a finding of psychiatric disorder, then the individual is treated in the usual psychiatric therapy modes. In addition, a complete medical and neurological workup is performed, including an electroencephalogram and, if indicated, more neurological study. If, however, there is no indication of mental disorder, then other measures are taken. These individuals usually are placed in therapy groups, where they may be helped to understand role demands and expectations and to learn appropriate outlets for aggressive feelings.

The first groups of "violent potential" officers were formed early in 1973. After careful selection in line with the criteria defined above, groups were formed consisting of seven to ten individuals. Approximately eighty individuals have gone through these groups.

Social learning theory is a useful framework for understanding approaches to the treatment of violent law enforcement officers. The premise of this model is that human behavior is learned in a social context. The use of group psychotherapy with the violent officer also is based on the premise that aggressive actions displayed by police officers are learned and that, if the officer is given an opportunity to learn alternatives, he will no longer resort to violent acts. Group psychotherapy is problem centered. The purpose of the group is to facilitate change and growth. The group setting provides an individual with an opportunity to test roles, try out new behaviors, and gain feedback from his peers.

The goal of this program was not to bring about profound character change but rather to increase inhibitors against aggressive acting out. Since apparently there had been some breakdown in the identification process where these inhibitors would have been introduced, we decided to introduce a surrogate model in the form of a fantasy ideal generated by the group.

Although we considered the notion that punishment is an effective inhibitor of inappropriate behavior, we decided to avoid the punishment model. The effectiveness of such a model tends to be broken down with time, as was clearly demonstrated by the number of times these men had been punished through department trial or civilian complaint board action.

Interviews prior to inclusion in the group revealed that these men had displayed hostility and aggressiveness not only in the course of their work but also in their daily interpersonal relationships and in their home lives. In general, these men felt low self-esteem, coupled with fear of loss of security from home and job. The result was a high level of fear and anger and a total feeling of overwhelming frustration, for which no legitimate channels of expression were offered.

Initial group sessions have some of the characteristics of a police confrontation situation. Police situations are ambiguous and leave room for a variety of responses. During the initial stages in the development of a group, there is a similar ambiguity. Participants are uncertain about appropriate behaviors and embarrassed by difficulties in responding to this situation. Anxiety generated by this new and unfamiliar situation directs the focus to the "here and now." The officer can then reevaluate and reexamine his relationship to the department, other officers, and the public. As in the field, there are no clear guidelines to indicate who the "good guys" and the "bad guys" are. Therefore, structuring and interpretation—based on the individual's needs, fears, and expectations—are required. Since each individual comes to the group naive, it is through the interaction with the others that he forms a new set of norms and acceptable modes of expression within the group.

We hoped to increase these officers' skill in dealing with aggressive situations generated by the group through use of peer pressure. Specifically, we believed that the individual would be forced to adopt nonaggressive measures or suffer group disapproval. As he handled the group reaction more satisfactorily, then he would become more confident and less threatened. We anticipated that the individual would become more aware of how his behavior affected other people. Therefore, the group members examined each other's beliefs, attitudes, and general information system in respect to each other's acts. Particular emphasis was placed on the incident that brought them into the group. In many ways, responding to another man's incident was equivalent to setting the stage for role playing of this incident and subsequent group evaluation.

In the initial group meetings, the atmosphere tended to be highly charged. Each man was suspicious of the others. The nature of the referrals tended to cause a high degree of paranoid ideation; that is, fear based on the fact that the sessions might have been designed to elicit some kind of confession of wrongdoing. Unlike outside peer groups, the members could not leave this group until they were permitted to do so. The alternative would be to remain in some kind of clerical office task—not a very positive job for an active individual.

When the men discovered that notes of the sessions were not being kept and that their experiences had a great deal in common, their fear of interaction was reduced; and after a brief period of time the interaction was intense. In general, in the beginning each man felt that he did not belong in the group but was another of society's victims. Once the interaction occurred, they all seemed to lose patience with each other's stance as martyrs and often reacted to whatever was being said so that it produced either insight or anger. The insight was usually promptly rewarded by group agreement that it was correct. The anger was analyzed as an example of that person's difficulty in other situations, and perhaps a better way of expressing it might be considered. A kind of fellowship developed between the group members, and they soon began assisting each other in trying to reach some compromise with the system. In the beginning phases of the therapy groups, a therapist was used to act as a facilitator. Gradually the members of the group were able to share in the facilitating process, and gradually the role shifted among members. The therapist was able to assume an active role and was accepted into the group because he too was a police officer. The speed with which a person responded served to control whether he was permitted to play leader, and the degree of understanding or support he offered seemed to determine if he could play facilitator. These roles seemed to have little to do with aggressiveness or direct forcefulness but rather with ability to referee the spontaneous attacks and criticisms the members leveled at each other and themselves. A process continued where each member attempted to set himself up as a role model but was frequently challenged. The single factor that served to produce the most insight and change, however, was the realization that each had experienced the same problems. The members of the group tended to see each failure by an individual to achieve progress or get insight as a group failure; as a result, in contrast to conventional therapy, the group acted directly and



used shame, guilt, and even punishment to force conformity. Through constant review and evaluation of each other's behavior in a variety of self- and group-generated real and hypothetical cases, the individuals actually underwent an intense learning process. In some ways the group criticisms, anger, and attacks tended to desensitize the individual to the same assaults outside of the group.

In conclusion, the theory that inappropriate behavior may express some deep inner conflicts proved of little value in dealing with immediate acting-out situations. It proved more therapeutically efficient to use an application of group principles based on peer interaction and social learning. Such an approach represented an alternative to long-term individual therapy and, although superficial in some respects, proved to be effective. The success of the program suggests that the gains are long lasting and substantial. Since the first group, many individual officers have gone ahead to make significant successes in their daily work, and none of the group has had a recurrence of the behavior which resulted in the original referral.

# Treating the Victim of Aggression

*Irwin L. Kutash*



The time has come for aggression victimology to be fully developed as a science. In this chapter a classification system is proposed that takes into account the kaleidoscopic array of victims that have been studied and their symptoms and psychodynamics. Inclusive treatment approaches will be proposed and outlined.

## History

The first proponent of victimology as a science was Mendelsohn (1956a, 1956b). Von Hentig (1948) had described the symbiosis that can exist between victimizer and victim and the part the victim may play in bringing about his own attack. Mendelsohn (1956a, 1956b, 1963) developed a classification

system for victims based on their degree of culpability in becoming a victim. Wolfgang (1970a) reported that 25 percent of murder victims precipitate their attacks. Herjanic and Meyer (1976b) found that 15 percent (32 of 214) of the homicide victims studied had a psychiatric history, which was true for only 4 percent of the general population. These ideas and findings are at the base of the classification system that will be presented.

Although aggression victimology has not been developed into a science, interest in the aggression victim has grown, and data have been generated that now make this a step that can be taken. The system presented here is based on studies in four areas—concentration camp survivors, battered children, rape victims, and masochists and on my own clinical work.

*Concentration Camp Survivors.* Bettelheim (1943), in his account of the concentration camp experience, describes in detail the behavior of the long-term victim, including such key symptoms as apathy, regression, and identification with the aggressor. Krystal (1968) has cataloged many symptoms in the survivor that have been descriptive of traumatic neurosis—such symptoms are irritability, free-floating anxiety, disturbed sleep patterns with recurrent nightmares, retrograde amnesia, neurasthenia, hypochondriasis, and somatization. Neiderland (1968) and Bychowski (1968) add such additional key symptomology to the survivor syndrome description as depression, lowered self-esteem, guilt, inability to handle anger, inability to establish interpersonal relationships, lowered ego strength, and paranoid personality features. Mattucek (1971), in studying late symptomology, found that many survivors continue the life-style of a prisoner; they apparently have developed a masochistic life-style. Chodoff (1970) found two symptom groupings in victims: some develop passive and apathetic life-styles; others, aggressive and paranoid life-styles. Berger (1977) found that some survivors accept the role of victim while others identify with the aggressor and experience guilt due to conflict over this identification. I have found some of these symptoms transmitted to a child of survivors as part of a family system. Sigal and his associates (1973) also found second-generation effects.

*Battered Children.* Kempe and his colleagues (1962) coined the term *battered-child syndrome* to describe children who are physically injured by their parents. This definition of child abuse was expanded by Morris, Gould, and Matthews (1964) and Young (1964) to include neglect, and the definition has

now come to include emotional mistreatment. Ounsted, Oppenheimer, and Lindsay (1975) believe that the battered child lacks basic trust; they describe his "frozen watchfulness," manifested in lack of speech or sounds, fixed gaze, and lack of positive affect. Blumberg (1977) describes the battered child as fretful and lethargic, with disturbed sleep and eating patterns and nightmares. Several studies have found that battered children frequently become child abusers as adults (Kempe and others, 1962; Mernick and Hurley, 1969; Oliver, 1971). Significantly, Bender (1976) found that battered children often continue their role as victim with individuals outside the home and may seek abuse all their lives. This dichotomy of identification with the aggressor or development of a masochistic life-style parallels the survivor findings.

*Rape Victims.* In the area of rape, as in the area of child abuse, studies of the attacker have far exceeded studies of the victim. Factor (1954) has discussed the rape victim's symptom of guilt based on unconscious complicity. Werner (1972) ascribed one rape victim's symptoms of depression (including insomnia, loss of appetite, and crying), fears, anxiety, and guilt to the fact that the rape had turned this victim's fantasy into reality. Burgess and Holmstrom (1976) describe traumatic neurosis (in addition to guilt and self-blame) as a possible result of rape. The constellation of symptoms for survivors is again seen. Notman and Nadelson (1976) found that rape heightens the victim's sense of helplessness, intensifies dependency conflicts, generates guilt and self-criticism, and interferes with trusting relationships.

*Masochists.* The literature on masochism also provides much theoretical and clinical material for the study of aggression victimology, since masochism can obviously be a key factor where complicity or symbiosis between victim and attacker is concerned. Masochism has been studied intensively by psychoanalysts since Freud (1905b, 1924) first described erotogenic masochism (masochistic behavior associated with sexual enjoyment) and moral masochism (behavior associated with a need for punishment from parental figures or from the introjected parental superego). In Reich's (1945) view, moral masochism represents a need for punishment, but it is also a defense to avoid even worse feared punishment if the individual does not submit. Masochism has also been related to the individual's feelings of powerlessness, self-hate, and low self-esteem brought on by his having a sadistic mother and fearing her total abandonment if this role is not maintained (Menaker, 1953) and to the

individual's characteristic manner of reacting to early conflicts (Berliner, 1958; Brenner, 1959; Eisenbud, 1967).

### Classification

Discussion of aggression victimology will be aided by a basic aggression victimology vocabulary and classification, which will be utilized throughout this chapter and may establish a common nomenclature for this new science.

*Victim* (n.). Someone killed, injured, or otherwise harmed by, or suffering from, some act or acts of aggression.

1. Primary victim—the person killed, injured, or otherwise harmed by an act or acts of aggression.
2. Secondary victim—the persons suffering due to an act or acts of aggression against a significant person other than themselves.

*Victimage* (n.). That which belongs to the state or condition of being a victim; e.g., experiencing victimage.

*Victimal* (adj.). Pertaining to or concerned with victiming.

*Victiming* (v.). Making oneself a victim; promoting victimage.

*Victimization* (n.). The state of being victimized.

*Victimized* (v.t.). To be made a victim of.

Victims of aggression can be divided into two distinct categories: (1) those who are victimized (play no role in becoming a victim) and (2) those who are victiming (promoting the victimage):

*Situational aggression victim.* An individual who is the target of a physical attack or of prolonged or repeated aggression because of circumstance. An individual who is victimized.

*Promotional aggression victim.* An individual who is the target of a physical attack or of prolonged or repeated aggression because of his own

conscious or unconscious invitation. An individual who is victimizing; for example, persons who derive pleasure from physical pain, who crave punishment to allay guilt, or who associate being hurt with being loved or taken care of. Masochists often are promotional aggression victims.

The duration and frequency of victimage also can be classified:

*Single victimage.* Experiencing the effect of a single physical attack; for example, a rape, mugging, or aggravated assault victim.

*Prolonged victimage.* Experiencing the effect of being aggressed against during periods of long duration; for example, a battered child or wife, a concentration camp prisoner, or a prisoner of war.

*Frequent victimage.* Experiencing the effect of being repeatedly aggressed against under varying circumstances; for example, living in a high-risk area, being in a high-risk occupation, or exceeding the law of averages in being a target of attack.

Victimage, whether through victimization (situational) or victimizing (promotional), may have different effects based on the age or developmental stage of the victim. Victims may also require specialized treatment modalities based on their developmental stage.

*Child aggression victimology.* That division of aggression victimology concerned with the individual from birth to adolescence or puberty.

*Adult aggression victimology.* That division of aggression victimology concerned with the mature or postpuberty individual.

The disorders that can develop in the situational aggression victim can be either acute or chronic; each type includes a discrete set of symptoms:

*Acute situational aggression victim syndrome.* A transient situational disturbance that follows a physical attack. Symptoms range from

exhaustion, anxiety, grief, disorientation, hostility, remorse, regression, and denial to extreme cases that simulate hysterical neurosis of either a conversion type or a dissociative type. The military used to refer to these latter symptoms as "shell shock" or "battle fatigue."

*Chronic situational aggression victim syndrome.* A disorder of long duration that an individual develops over a prolonged period of being the victim of aggression. Symptoms range from neurasthenia, chronic anxiety, guilt, irritability, sleep disturbance, retrograde amnesia, extreme apathy, regression, low self-esteem, and weak ego strength to identification with the aggressor, massive hypochondriasis, somatization, and psychotic depressive reactions.

Whereas a situational aggression victim may develop disorders that weaken ego strength, promotional aggression victims have ego deficits to begin with. These disorders can be of three types: impulsive, compulsive, or characterological:

*Impulsive promotional aggression victim disorder.* A transient disorder occurring when an individual receives a severe blow to his ego or self-esteem (loss of job, school failure, unrequited love) and immediately endangers himself, either consciously or unconsciously. Although the individual may regret his impulsive act later, at the time he experiences it as pleasurable and irresistible—because he has adopted the rejecting party's attitude toward him and therefore seeks punishment; or because he hopes for revenge by taking a "look-what-you-drove-me-to" stance; or because he is consciously or unconsciously attempting to gain acceptance or, at least, pity.

*Compulsive promotional aggression victim disorder.* A chronic disorder occurring when a person's early experiences have produced infantile feelings of anxiety or guilt, so that, as a reaction, the individual repetitively invites punishment. His victiming is insistent, intrusive, and contrary to his wishes but serves as a substitute for still more un-

acceptable unconscious wishes. Not victiming, therefore, leads to more anxiety than victiming. This reaction involves a buildup of guilt or anxiety, its diminishing by victiming, and then a repetition of this cycle; that is, the individual has come to deplore himself for exaggerated sins, and victiming leads to temporary relief from the guilt or anxiety.

*Characterological promotional aggression victim disorder.* A chronic, habitual, maladaptive disorder occurring when a person has come to associate sexual gratification, gratification of dependency needs, or love with physical or psychological pain and then consciously or unconsciously develops a life-style that seeks it out. In other cases the victim derives pleasure from identifying with the aggressor and vicariously satisfying his own aggressive wishes. In this disorder the pattern of reacting is ego syntonic, as opposed to the compulsive promotional aggression victim, whose actions are ego alien.

Although these five discrete categories of disorder have been established, and somewhat different treatment approaches will be elucidated for each, these disorders, like all mental disorders, are rarely seen in pure form. There is often a somewhat promotional component in the most situational aggression victim, and vice versa. Furthermore, from undergoing prolonged victimage as a chronic situational aggression victim, a person who is not treated can develop a promotional aggression victim disorder.

### Treatment

Treatment of each of the five aggression victim disorders will be considered. The focus will be on those methods most specifically applicable to each; however, methods used with victims but also already utilized with other disorders, and already in the literature in that application, will not be discussed in detail. Two new psychoanalytically derived psychotherapies will be described and then integrated into the treatment plans advanced for each disorder.

Situational Aggression Victim Emoto-restorative Psychotherapy (SAVE Therapy) is a modified analytically oriented



psychotherapy specifically designed for treating situational aggression victims. This approach consists of thorough exploration of the traumatic attack or events and the feelings involved with them and then putting them in the context of the person's overall experience, which minimizes its impact. It involves ventilation and then reintegration of the event in its proportional place against the backdrop of the person's whole, more nurturing, life experiences. Its goal is to restore the victim to his or her pre-trauma condition.

Promotional Aggression Victim Emoto-remotivational Psychotherapy (PAVE Therapy) is a modified analytically oriented psychotherapy designed for treating promotional aggression victims. It includes thorough exploration of the feelings one experiences by victimizing and, most important, helping him or her become conscious of the unconscious causes of the victimizing. After the individual is in touch with the feelings he experiences while victimizing, he is helped to trace these feelings to past relationships with others. He may, for instance, find that the feelings extend back to early childhood with sadistic parents or to some other early sources of guilt or anxiety. This exploration can lead to the insight that there is no cause to hate oneself or to continue to experience anxiety or guilt for past "sins" to be alleviated by victimizing. It can lead to the discovery that satisfying dependency needs or receiving love is not dependent on victimizing or that sexual gratification does not have to be paired with pain but is allowed without a price. The person is also guided to recognize his own part in becoming a victim and the control that he or she exercises over it. In reviewing the history, the therapist can eventually help the patient arrive at the insight that these victimal experiences are more than coincidence. The person is then free to adopt new behavior that is less self-destructive. The goal of this therapy is to remotivate the individual so as to prevent recurrence of victimizing (as distinct from SAVE Therapy, where the therapist is minimizing the adverse emotional effects of victimization).

*Treating the Acute Situational Aggression Victim.* Three phases are involved in treating the acute situational aggression victim: (1) on-the-scene crisis intervention (when possible); (2) reintegration of the individual into society by utilization of ongoing significant individuals in the victim's life; (3) short-term SAVE Therapy with primary victim and, when necessary, with secondary victims. The goals of this treatment are to limit the effects of the traumatic event and to prevent chronic or permanent

emotional disability as an outcome of the attack. In other words, the primary aim is to help the person back to the level of functioning he or she enjoyed prior to the attack. In some cases the goal can exceed this, and actual growth can accrue from the overall trauma and treatment as the victim explores his reaction and successfully overcomes adversity.

On-the-scene treatment of the situational victim of an aggressive attack will, of course, include medical attention, but immediate psychological attention should not be overlooked. In addition to whatever physical harm is done, some immediate psychological symptoms are often apparent, ranging from anxiety, depression, and disorientation, to hostility, remorse, denial, or regression; in extreme cases symptoms of hysterical neuroses, of either a conversion or a dissociative type, are apparent.

The very first reaction after the attack is usually anxiety and disorientation. What the victim needs is calm reassurance and reduction of stress while he or she is being removed from the scene. The trauma must not be increased. In severe cases sedation or tranquilization may be necessary but should not be a routine procedure. Many victims can profit from an immediate understanding of exactly what happened and from ventilation of their feelings. If the person is distorting reality, not because of lack of knowledge of what happened but because of the psychological effect of the attack, he should not be contradicted or agreed with. The presence of family or friends at the scene or shortly thereafter should be encouraged or discouraged, depending on whether they increase or decrease the victim's agitation. The family and close friends of an attack victim, if they are not too adversely affected or emotionally disturbed (for instance, the husband who blames his wife for her rape), can be vital in the attack victim's quick recovery. Their warm attitudes can highlight the singular and aberrant nature of the attack. Their acceptance can alleviate the lowering of self-esteem experienced by an attack victim who feels that his or her own flaws led to the attack. If the family members overreact and do not return to the pretrauma status quo or if overprotection is apparent, family counseling may be required.

A rape or physical attack can have psychological effects on people who are emotionally involved with the primary victim; these people, who can be considered the secondary victims of the attack, often need treatment of their own. This possibility certainly should not be overlooked if the primary victim perishes from the attack.

The short-term SAVE Therapy phase is initiated if any symptoms of the situational aggression victim syndrome persist beyond the period of time it takes for physical recovery and when the natural healing process is not taking place. The traumatized victim is helped to ventilate attack-related feelings and to resolve the attack-created conflicts and self-doubts that will not allow him to return to his preattack level of functioning. Specifically, the therapist, after getting to know the person and forming a relationship, has the patient describe his or her attack in detail; he then zeros in on the emotions the patient displays in the retelling and reflects these feelings to the patient or interprets them to him or her. If feelings are not expressed, the therapist asks the patient, "How did you feel while that was occurring or just before the attack or right afterward?" The patient's feelings toward significant others prior to and after the attack are also explored. The person is then guided through an exploration of previous experiences and relationships with people; and, again, the individual's feelings in these relationships are highlighted. In this exploration of the patient's history, the attack is reintegrated into his overall experience; that is, it is put in its proportional place as the exception rather than the rule—an atypical experience.

With children this process can be incorporated into play therapy to help them explore the attack and previous experience. Dolls or puppets can be most effective in playing out events; such role playing may give these children their first real understanding of what happened, their first outlet to discuss what happened, and their first realization that it is not their fault or a taboo subject.

*Treating the Chronic Situational Aggression Victim.* Three phases are involved in treating the chronic situational aggression victim: (1) extrication from or treatment of the system in which the victimization occurs; (2) integration or reintegration of the victim into his family or society; (3) long-term SAVE Therapy if the chronic situational aggression victim syndrome is manifested.

Unlike the acute situational aggression victim, the chronic situational aggression victim may still be in the process of being victimized when he or she is first brought to the attention of the therapist. The treatment can involve raising the consciousness of the chronic aggression victim to his victimization, so that he can extricate himself from it or seek appropriate help for his problem. In other situations—for instance, where the vic-

tim is a battered child or wife—family therapy or marriage counseling may be required in order to treat the system in which victimization is occurring. Those cases where a person is being victimized, rather than promoting victimage, but needs help to get out of chronic victimage are hard to separate from cases where the victim is partially culpable or masochistic. In fact, the chronic situational victim may develop into a promotional victim.

Treatment for prisoners of war or concentration camp victims, whom the therapist sees only after their extrication, focuses on helping the individual become psychologically ready to regain his former place in society. Where the victim has been separated from family or wife, family therapy or marriage counseling can be essential along with the victim's own individual treatment. If the victim is unmarried and remains untreated, his future family and children may need these modalities along with the victim, because the victimal personality of the survivor may affect those he is closely involved with.

Long-term victimage, except for those with the strongest premorbid ego, can lead to a discernible lowering of ego strength and self-esteem and personality characteristics that accompany it. In many cases the result is the chronic situational aggression victim syndrome, necessitating a long-term SAVE Therapy phase. In long-term SAVE Therapy, developing a therapeutic alliance can be difficult, and forming a trusting relationship as a prelude to successful therapy can take a long time, since the therapist must prove his reliability, interest, and trustability and must work through initial transferences to authority figures. The therapy itself involves thorough exploration of the victimage and the feelings involved with it and then putting it in the context of the person's overall experience, requiring extensive exploration of his past.

Most long-term SAVE Therapy patients have had a normal developmental history before being set back by prolonged victimage. The therapy in these cases is, therefore, a rebuilding therapy. Another group of chronic aggression victims, however, are the long-term victims of child abuse or concentration camp survivors whose victimage began before their egos were fully developed. In these cases a building form of therapy, as opposed to a rebuilding, is necessitated. In addition to therapy, a therapeutic milieu in which the child can build his ego is essential.

If treated during childhood, a battered child may be discovered while still in the situation of chronic victim. Untreated,

he or she may develop into a promotional aggression victim as an adult, expending great effort to find relationships like his early relationships. A battered wife, for instance, may have been abused as a child. She may have had a "warm" father who beat and abused his children when he was intoxicated; she therefore sought and found a husband who would provide what she was accustomed to, or had learned to feel she deserved, or had come to associate with more positive aspects of her relationships with parents.

Battered children can be spotted by professionals in schools, clinics, or doctor's offices with repeated physical signs of abuse or emotional signs of psychological abuse. In some such cases the pathological family is open to being treated as an entity; in others the victim must be removed from the traumatic environment, usually through legal action by social agencies. Replacement with a therapeutic milieu and therapy to "work through" these early damaging experiences must follow.

SAVE Therapy with adults must involve exploration of their experience as a victim in the context of their overall experience, in order to rebuild their ego strength and to reintegrate them into society. SAVE Therapy with children involves exploration of their traumatic experience, along with any more healthy experiences, as part of a relationship therapy, designed to build ego strength. It allows the child to go through developmental stages with the therapist at the same time as a therapeutic milieu is provided, where social ties and identifications can occur.

*Treating the Impulsive Promotional Aggression Victim.* The treatment approach for the impulsive promotional aggression victim includes (1) on-the-scene crisis intervention (when possible), (2) reintegration of the individual into preexisting relationships of a positive nature, and (3) short-term PAVE Therapy with the victim and short-term SAVE Therapy with secondary victims when necessary.

The impulsive promotional aggression victim, unlike the acute situational aggression victim, has placed himself in a situation where he could become a victim in reaction to being rejected by significant others. Therefore, this type of victim must be helped to understand his motivation (to punish someone who has spurned him, by creating guilt or regret in this rejecting person, or to punish himself for being so "unworthy") and to recognize different possible reactions to future rejections. The goals of this treatment are to prevent the repetition of the invi-

tation to be aggressed against and to help remotivate the victimizing individual desirous of change.

In addition to the steps already described for on-the-scene treatment of the acute situational aggression victim, the impulsive promotional aggression victim must be observed and, if necessary, restrained, since he may escalate his victimizing. His anger may grow if his victimizing does not have the desired effect on the person who delivered the blow to his ego or self-esteem and thereby precipitated his impulsive victimizing.

The impulsive promotional aggression victim has several identifiable features. Rather than being anxious or disoriented as a first reaction to being attacked, he may show signs of relief of tension. He may, if depressed or hostile, display regret or hostility—not toward the attacker or even, as the situational aggression victim might, toward the helper but, instead, toward a party who is not even on the scene. Finally, he may provoke further attack. In these cases utilization of family and close friends can be important to show the person that he or she is cared for, if that is the case. If destructive ongoing relationships exist, family therapy or marriage counseling is indicated.

If the victim can be motivated to enter therapy, a short-term PAVE Therapy phase should be initiated immediately following the first identifiable victimizing. In this phase the victim is helped to ventilate the feelings that led him to invite the attack, as well as his feelings during the attack, and to explore the often unconscious cause of the victimizing, the victim's fantasied results, and the actual results. The victim is then helped to discover alternatives leading to new motivations. Analysis of the results from their victimizing, as opposed to their fantasied results, often motivates these victims to seek a different solution to similar circumstances in the future. If the victim got the desired effect, such as shows of affection or regret, he must be helped to realize that positive feelings in others were there with or without the victimizing.

When the individual has repeatedly put himself in danger in an impulsive fashion following rejection, he must be guided to identify antecedent events and feelings: "If I am rejected, I feel tense and irritable; then I put myself in danger." Once the person sees that *A* (I am rejected) leads to *B* (I feel tense) and then *C* (I impulsively begin victimizing), he can catch himself at *A* or *B*. This approach of building in a barometer for future danger is, as will be seen, a technique also of great utility with compulsive promotional aggression victims.

*Treating the Compulsive Promotional Aggression Victim.* The treatment for compulsive promotional aggression victims is long-term PAVE Therapy, because their disorder—like that of the characterological promotional aggression victim—developed over a lifetime and is firmly ingrained. With compulsive promotional aggression victims, however, the prognosis is far better than with characterological promotional aggression victims, because the symptoms are ego alien rather than ego syntonic. The guilt and anxiety that motivate these victims to victimizing can also motivate them to therapy, because they get only temporary relief through victimizing.

The therapy with both compulsive promotional aggression victims and characterological promotional aggression victims includes exploring the victim's feelings during victimage and making conscious the unconscious meaning of these victimizing actions and feelings. Such standard psychoanalytic techniques as relating the past to the present, dream analysis, analysis of transference, and free association are utilized to bring into the person's awareness and understanding the latent as well as the manifest motivations of his actions. The person is then guided to an understanding of his own irrational or no longer rational motivations, leading to remotivation to normal functioning.

In PAVE Therapy with compulsive promotional aggression victims, the victim may consciously experience guilt but be unconscious of its origin due to repression. He will, to gain temporary relief from guilt, put himself down as well as invite punishment from others. These persons show low self-esteem and what has been referred to as an "inferiority complex." They may even justify the acts of aggression against them and rationalize. The therapist must lead these victims back to their infantile fantasies, especially to aggressive fantasies that have been repressed due to fear of exaggerated consequences. These feelings must be made conscious—through free association, dream analysis, and examination of feelings during past victimizing behavior—and then ventilated. The person must discover that he has done nothing wrong, or else he will compulsively promote his own punishment, be accident prone, have foreboding feelings, be unable to handle success, be oversolicitous of others, or become a martyr in order to atone. He may even become a criminal in order to be caught and punished.

As has been seen, the compulsive promotional aggression victim may compulsively and repetitively invite attack to atone

for unconscious guilt feelings. Exploration of the victim's history can bring about the insight that all the victimage is more than coincidence and that he has had a part in promoting it. By zeroing in on the feelings during the victiming and asking the person when he experienced these feelings before, the therapist can help the victim get back to these previous incidents—perhaps all the way back to childhood experiences with parents. Associating to the feelings in dreams may have the same effect. Once the pattern is identified and the victim is conscious of it, he has the option of acting differently, since the motivation for the compulsion is diminished. The technique of identifying antecedent events and feelings to the victiming, to build in a barometer of when victiming may again occur, can be effective in this regard.

*Treating the Characterological Promotional Aggression Victim.* In the characterological promotional aggression victim disorder, the prognosis is worse than in all previous disorders discussed. The characterological promotional aggression victim associates satisfaction of dependency needs, love, or sexual gratification with pain. Since these victims are less likely to feel anxiety and depression than are those in the other categories, they are less motivated to change or seek treatment. The nature of the victiming does not often lead to contact with professionals who will steer them to therapy. Since victiming is their life-style, an "on-the-scene" phase of treatment is ruled out. Utilization of family or close friends can be counterproductive unless they are motivated toward changed relationships, and they are often an integral part of the pattern. Sometimes, however, PAVE Therapy can get the person in touch with the feelings he experiences in his victiming life-style and then explore where else or how else he can experience such satisfaction of needs, love, or pleasure. For several possible reasons, these victims have never experienced many normal outlets for gratification: (1) Their self-concept will not allow them to seek different types of acquaintances. (2) They have great quantities of anger, which—in their masochism—gets turned inward. (3) Their early experiences tied satisfaction of dependency needs, love, or sexual pleasure with pain and led them to the unconscious deal "I must experience pain to be allowed satisfaction of dependency needs, love, or sexual pleasure."

Some characterological promotional aggression victims may invite aggression or live in a masochistic life-style because, throughout their early development, they were shown attention



and concern primarily after they were injured or abused or while they were ill. Here again, the unconscious origin of their masochism must be unearthed through insight-oriented analytic techniques and new motivations then discovered or alternative "healthier" ways found to fulfill their needs.

Other characterological promotional aggression victims, while also seeking punishment or displeasure, achieve sexual pleasure from being punished or humiliated. This makes the condition less responsive to treatment. These victims often identify with the sadistic aggressor and thereby satisfy their own sadistic impulses or infantile needs for power or control. Where pain and humiliation are perceived as pleasurable in and of themselves by the victim, the prognosis is especially poor. It is somewhat better in cases where pain is a prerequisite for sexual gratification or where the patient has a masochistic character trait and enjoys his power over the aggressor but does not enjoy the pain itself. In these cases the victim can learn that pain is not a price one must pay to enjoy sexual pleasure. Once this equation is conscious, his own aggression can find direct constructive outlets as he develops greater ego strength. In contrast, those who find pain pleasurable are being treated to give up something they enjoy and will see no gain in doing so, except if driven to treatment by the law or medical factors. The person must discover that what he desires can be had in less self-defeating or even in self-enhancing ways.

# Society's Recognition and Control of Violence

# 25

*Sandra Haber*  
*Bernard Seidenberg*



Murder, crime, gangs, blacks, truck drivers, men, torture, hate, uneducated, unsocialized, disgusting animals. These are some of the associations elicited by the word *violence* in a brief survey that we conducted. These words highlight and summarize some of the basic beliefs that many people have about violence and the perpetrators of violence. As with many stereotypes, there are elements of distortion in these associations. For example, many acts of violence occur in the households of model citizens. Evidently, the stereotype of violence emerges from the well-known and frequent instances of violence that are reported to the public. However, as our view of the prevalence and occurrence of violence is heightened and broadened, we should be able to take perspectives that modify our initial stereotypical view of violence. For example, the expanded view of violent

acts, perpetrators, and victims can include police violence, aggression of prison guards, prisoner violence, wife beating, child abuse, student-police riots, abuse of hospitalized mental patients, and violence directed toward victims of war.

### Social Construction of Violence

Why is it that many of the situations cited above were not part of our initial belief system of violence? The answer, in part, is that the perception of an act as violent and its further characterizations as socially tolerable or not—indeed, its very appearance in the consciousness of the citizenry—depends on a complex interplay of a number of factors. Rather than providing a simplistic definition of violence, let us attempt to explore some of the complexities involved in determining what is and what is not a violent act and, furthermore, what constitutes a justifiable as opposed to an unjustifiable act of violence. Let us look at a series of examples and try to judge whether or not the acts involved are violent and whether or not the violence is appropriate or inappropriate. (By the terms *appropriate violence* and *inappropriate violence*, we attempt to convey the fact that an important aspect of defining violence is some judgment of its inevitability and accountability. We also recognize that this judgment is subject to social forces which may result in the short-term or long-term revision of the judgment. For a discussion of the problems in labeling violence, see Couzens, 1971.)

We would probably all agree that a stranger who spotted a lone child in the street and proceeded to hit the child would be committing a violent act. But what if it was the child's parent who hit his or her son for running out in the street between parked cars? Would this be violence? If so, how does it differ from the previous example? Clearly, the agent of the act and the reason or set of circumstances under which the act (hitting the child) occurred are different. Many persons would view the latter situation as appropriate violence, while others would not even use the label *violent* to describe the situation.

Now let us again change the picture. This time a parent mildly slaps a child because the parent enjoys the powerful feelings that he or she gets from the terror the child experiences. Here we have a mild physical act, but group consensus would define it as inappropriate violence because the behavior, although mild, is undeserved and wrongly motivated. Finally, let us take the case of a person who likes to threaten children with

stories of devils and witches that will eat them up in the middle of the night. The more the child cries in fear, the longer and more gory the stories become until the child collapses in a fit of sobbing. Is this person exhibiting violence? Most of us would agree that he is; yet, in fact, there was no physical act; the violence exists purely on a psychological level.

From these few examples, we see that many acts by themselves cannot be said to be violent and that, once an act is determined to be violent, further information is needed to determine whether the violence is appropriate or inappropriate. The social construction of violence, or the labeling and interpreting of particular acts, depends upon four factors and circumstances that do not reside in the act itself: the agent of the act, the victim, the situation, and the degree of harm.

If the agent of violence, the person or group who performs the violent act, is regarded as legitimate, his act will generally be regarded as appropriate. In a bank robbery, for example, the policeman using force to prevent the robbery or to capture the robbers would be perceived under almost any circumstance as a legitimate agent of society, and the force used would therefore be perceived as appropriate. However, any violence initiated by the robbers toward the police or toward bystanders would be viewed as inappropriate violence. Therefore, society has given certain individuals the right to use force, and these individuals are, in fact, legitimate agents of violence.

Another issue of great importance in defining appropriate or inappropriate violence is the status of the victim. In general, the higher the status of the victim, the less tolerated is any violence directed at him or her. The prototype of this high-status person in our society is the white middle- or upper-class male. Conversely, violence directed at victims of more questionable status—be it blacks, women, or children—is perceived, in varying degrees, to be more appropriate. The clearest case in point is that of blacks. When their status was that of slave—essentially property—acts of violence committed against them were perceived as appropriate. Today, although many racial problems still exist, acts of violence against middle-class blacks are more and more perceived as inappropriate. Similarly, the interpretation of the violent act of rape will be mediated by the status of the victim. For example, the rape of a female captured during wartime, a divorcee, a prostitute, a nun, a young girl, and a seductively dressed woman will all be subject to different perceptions, even though the physical act is, in all cases, identical.

A third issue is the situation or context in which the violent act occurs. The act of policemen shooting into a group of peaceful demonstrators is usually viewed as inappropriate, whereas policemen shooting into a group of armed gang members is seen as appropriate and tolerable. The act of violence for the purpose of self-defense is perceived differently from the act of violence initiated for its own sake; and, indeed, we have different laws applying to each of these actions. In a similar vein, if an unknown male has forcible intercourse with a female, the act is more easily considered rape than the same act committed in a situation where the partners have known each other and interacted before the act of forcible intercourse. Therefore, the particular set of circumstances under which the violent acts occur will be of critical importance in determining the appropriateness of the violence.

The degree of harm is the final factor of importance in determining the interpretation of the violent act. For example, corporal punishment of children is fairly widespread in our culture. Punishment—ranging from occasional mild slaps to severe scheduled whippings to battering and tortures of various kinds—is the lot of untold numbers of children. The point at which such punishment passes from permitted legitimate punishment, allowable to parents as a means of behavioral control, to inappropriate abuse is not clear and probably not easily definable. However, if the harm done reaches public notice in some way—that is, if it comes to the notice of a physician or neighbors—it then has a high probability of being perceived as inappropriate violence. Similarly, whether one calls the common behavior of a group of young males “horseplay” or “violence” depends on the harm done by the behavior; if someone receives serious injury, we will term the behavior “violent.” Clearly, then, the degree of harm inflicted on the victim is an important aspect in the determination of a particular act as violent.

At any given time various segments of society may not agree that a particular act is violent or, if it is violent, whether the violence is appropriate or inappropriate. Thomas Hobbes, Max Weber, and other social theorists have noted that the “State” is the exclusive source of the “right” to use violence and that all other groups or individuals may use violence only to the degree permitted by the “State”: “But still a moral dilemma intrudes. How many citizens must consider the violence legitimate? All? A majority? Even in the latter case there is difficulty; no doubt a majority of the citizens (white) in Selma, Ala-

bama, or Philadelphia, Mississippi, thought the officials' use of violence against civil rights workers was legitimate! Discussions of 'law and order,' so prominent in the 1968 election campaign, are really thinly disguised calls for the authorities to use force against any disruptive social group to which lawlessness can be imparted" (Iglitzin, 1970, p. 172). Similarly, externally directed violence or war, although often widely and enthusiastically supported, is frequently opposed by various subgroups and individuals initially, although such views usually become muted by the enormous pressure of national purpose. In recent history there was such opposition to American involvement in World War II, but the Japanese attack on Pearl Harbor either silenced the neutralists or converted them to the cause. In contrast, opinion about the appropriateness of the Vietnamese War gradually shifted in the opposite direction—from the consensus that the violence was appropriate to the view that it was inappropriate. Initially, the small and then gradually escalating American role seemed, at least to many opinion leaders and elected officials, acceptable and consistent with national policy. The ever increasing escalation, combined with a lack of clear-cut results and a national policy that seemed vague and out of joint with the degree of involvement, led to more vociferous public questioning of the war. Finally, the initial hard-line view was no longer supported by the majority, and it remained only for the technical details of extricating the United States from that situation to be completed. Although many might have wished for continued escalation of the war, these groups have now become the minority voice, and the Vietnamese War is probably now generally regarded as an example of inappropriate violence.

There are many examples of officially sanctioned violence committed against various individuals and subgroups in our culture. For example, only now can a television program explore the injustice of the United States policy toward its own citizens of Japanese descent in 1942. More recently, authorities and much of the public initially supported the National Guard action at Kent State University and the police behavior at Attica Prison in New York. In both instances, the use of massive force by authorities was initially perceived as necessary and appropriate when used against less advantaged elements. The targets in the Kent State incident were "student radicals," and at Attica the targets were criminals. Both events occurred, however, at times of great social ferment when anti-Vietnam War groups and civil rights groups were heavily organized and active

and took up these respective causes. Because of the social climate, these events were subject to great public scrutiny, with similar outcomes. In the Kent State incident, it soon became clear that the student victims had engaged in no specific acts other than being in the crowd. Guardsmen were tried but were not convicted. The outcome was not clear-cut, since students died but were absolved of committing criminal acts and agents of legitimate authority were tried but absolved of criminal action. If one can stand apart from the human aspects of the tragedy, it seems clear that the public judged the guardsmen's violence inappropriate, but not to such a degree as to be punishable. In the case of Attica, a similar outcome ensued. There was a public outcry for punishment of the state troopers, because many viewed their violent actions as a police riot directed primarily at blacks and Puerto Ricans. The troopers were not tried, but investigative agencies did probe the police action. Furthermore, although some of the prisoners were tried for violent acts, at this date all but one have been pardoned. Such consequences may act as a brake on future police decisions to use force.

Yet another type of redefinition involves the use of force by subgroups. In general, persons and groups using force are subjected to great scrutiny by the public and a state jealous of its own privilege of controlling and dispensing violence. At various times the violence of vigilante groups, the Ku Klux Klan, and lynch mobs has been approved at least tacitly, with authorities either not pursuing or even hindering investigations. Even some types of murder—gangland killings, for example—may be tacitly accepted as long as the violence does not endanger other citizens. In other instances violence, the threat of violence, or even peaceful demonstrations and assemblies by subgroups representing initially unpopular ideologies are punished severely by official action or unofficially by means of police riots, in which violence all out of proportion to the instigation is meted out to the demonstrators. Labor strikes and organizing campaigns, civil rights demonstrations, prison strikes, antiwar demonstrations, and demonstrations against nuclear power plants are all examples from recent history.

Sometimes subgroups (such as ghetto rioters or revolutionary urban guerrillas) engage in behavior that is perceived by the society at large as inappropriate violence but is condoned by the subgroup. As Iglitzin (1970, p. 170) has pointed out, such violence "occurs when the political channels are closed—or are so rigid and inaccessible to particular groups that they feel they

must take matters into their own hands if they wish to bring about social change." For example, many blacks regard violence as a necessary factor in social change. Kahn (1972), questioning a sample of 1,400 American men, noted that "Blacks are less optimistic [than whites] that changes can be made fast enough without property damage or injury. Blacks, like whites, were convinced that change can come without killings but they are less certain that it can be brought about without injury or damage" (p. 48). Kahn further observed that "More than one fourth of the black men agree that 'protest in which some people are killed' will be needed before blacks get the social change they want; only 6 percent of the whites agree. Moreover, college education reduces whites' beliefs in violence for social change; it increases the likelihood of this belief among blacks" (p. 83).

A final nice point concerning the definition of violence involves the perception of a crime and evidence by a jury. On occasion juries depart from control procedures institutionalized in the law and in the judge's instructions: "The obligation to defer to the court's instructions, while binding on the juror, exists side by side with a protected power and privilege to override that obligation. The result is the legitimized interpretation of the juror's judgment between the consequences of the court's instructions and the fate of the defendant. There follows the possibility of a justified departure from rules by agents acting in a role, a possibility that may serve social ends of major significance" (Kadish and Kadish, 1971, p. 199). Juries have acted independently, for instance, in prohibition and gambling cases and in many instances of violence growing out of antiwar and antidraft activities.

Although social scientists are much more able to describe these processes than to predict how a particular violent act will ultimately be judged, some conceptual tools do exist that enable us to begin to understand such processes.

Goode (1972), who views force as one of the four great social control systems in all societies (the others are prestige, wealth, and love), has presented an analysis of conditions that affect the use of force or—more correctly—increase the probability of the use of force. In his view, when the ruling class and a subject class do not share the same value system, the rulers will probably resort to force as a means of subduing the subject class (and, it seems to follow, the subject class also will use force). Goode also enunciates certain hypotheses about how force is perceived. In general, when force is used by stronger parties



against weaker parties, it will be perceived by the public as more necessary, and hence more justifiable, than if it is used by the authorities against advantaged segments of the society. Finally, the use of force where values, norms, or moral suasion is perceived as a more proper form of control leads to a loss of prestige or disapproval for the wielders of the force.

Another viewpoint of social process, conflict theory (Coser, 1956), focuses on the necessity of violence as an expression of contending groups and interests within any society. To some degree every social group contains individuals whose private views on any issue may vary along the entire continuum of agreement-disagreement with any value, policy, norm, or action. For any particular position, then, these private views may be expressed behaviorally through active support, compliance, or indifference and avoidance of the issue. Moscovici and Faucheux (1972) have presented a conformity model based on conflict theory and other mechanisms. In this model a committed minority can change the apparent will (norms, values, policies, beliefs) of the majority through a combination of its own strength of commitment and the fact that many of the majority are only engaging in compliant or indifferent behavior and can be mobilized to support the minority and create a new majority.

These and other social mechanisms can help us to explain the ultimate changes in the public's perception of events such as Kent State and Attica. The conditions where force was used and directed at low-status persons (Goode, 1972), the conflicting interests and viewpoints drawn into the issue and expressed by the outbreak of conflict (conflict theory), and the apparent compromise in interpretation ultimately arrived at (Moscovici and Faucheux, 1972) seem clear when appropriate models and concepts are introduced. Samuels (1975) provides an additional example by further analyzing the sequence of events in the Kent State incident in terms of cognitive dissonance theory (Festinger, 1957) and showing that factual evidence gathered by one arm of authority (the FBI) was ignored or distorted by local law enforcement officials and the grand jury.

### Social Recognition of Violence

Much of the discussion of violence up to this point has involved issues of social control, methods by which individuals maintain the status quo in society and prevent or deal with dis-

ruptive acts. Our exploration has centered on society's interpretation of violent acts as appropriate or inappropriate. However, another aspect to the study of society and violence involves situations where violence, or the acknowledgment of violence, becomes a factor in social change. For example, certain violent acts with long-term historical bases have only recently come under public scrutiny and are being newly acknowledged as violent. This apparent paradox—a long-occurring type of violent act that is just now seen as violent—can be understood through a social-psychological explanation of social change. We suggest a multistage process through which the violent act moves from the private (family) domain, where it may even be perceived to have positive effects, to the public domain, where it is considered a problem, a crime, and basically an undesirable behavior requiring intervention and control.

We have chosen three social issues—rape, child abuse, and battered wives—all of which illustrate the link between the acknowledgment of violence and social change. Each of these types of violence has “existed” for as long as society has existed; yet only recently has each become a focal point for societal concern. The process by which these issues move from unacknowledged existence to public concern can best be described by a six-stage process:

*Stage 1: Tacit Public Acceptance.* Within the private sphere (the family), the victim—the woman or the child—is viewed as an extension or a product of the husband and thereby subject to his will and control. Although the public “knows” that acts of force are occurring, these acts are not seen as negative and are even viewed as an aspect of appropriate behavioral control. According to Bem and Bem (1970, p. 89), the tacit acceptance is the result of a “nonconscious ideology,” a system of beliefs and attitudes that are implicitly accepted but remain outside of awareness because alternative conceptions of the world remain unimagined. For example, as Fontana (1976, p. xiv) notes, child abuse may be seen as a symptom of a sick society: “Thus, we minimize the seriousness of the child-maltreatment syndrome, blame the phenomenon upon the illness in our society, and tell ourselves that there is nothing we can do about it.”

Important to our further understanding of this nonconscious ideology is the concept of norms or standards of behavior that are regarded as appropriate to an individual or group of individuals. Various examples of norms exist, from “macho” behavior to regional subcultures of violence. “Macho behavior”

refers to violent behavior that is viewed as an integral part of a male's expected behavioral repertoire—indeed, the “right” of the man to assume a position of power through violent means (Ball-Rokeach, 1973). Similarly, the term “regional subcultures of violence” refers to violent norms of behavior that apply to larger sections of the society—for instance, the southern United States (Gastil, 1971).

*Stage 2: Public Awareness.* An issue surfaces from nonconscious ideology to public awareness because certain middle-class, intelligentsia groups have the time, concern, knowledge, and resources necessary to focus attention on a specific issue. During this stage of public awareness, an apparent paradox emerges; that is, the public is made increasingly aware of the prevalence of a particular act, but almost all expert sources conclude that they really do not know “the facts.” For example, Fontana (1976, p. 34) notes that “It is difficult to estimate the number of children being physically abused or neglected in the course of a year. We do not even know how many cases of child maltreatment are *reported* across the nation; we do not know how many reported cases refer to neglect, how many to abandonment, how many to sexual abuse. We do not know how many cases go *unreported*, although we cannot help suspecting that what we see is only the tip of the iceberg.”

Statistics become especially confusing during the early stages of this paradigm because the number of violent incidents tends to rise sharply. For example, Gager and Schurr (1976) note that “Rape is the number one crime against American women, and it is increasing at a shocking rate. Forcible rape is the fastest-growing crime among the FBI's major crime categories. . . . Between 1969 and 1974, the number of reported rapes leaped a horrifying 49 percent.” What is confusing is whether the incidence of rape did in fact rise dramatically during these years or, rather, whether this apparent increase is not a result of rape task forces which have encouraged and supported increased numbers of victims of this crime to seek help.

The mechanism by which a group of concerned individuals successfully increases public awareness is complicated. In the case of wife abuse, for example, the feminist movement provides a cadre of educated individuals with a heightened awareness of the situation of women in our culture. Feminist concerns take root in higher education settings, from which crisis and counseling centers, legal challenges and information, theories courses, and explanations arise and are then seized upon

by the mass media for public consumption and awareness. For example, hot lines and crisis centers, usually funded by a volunteer staff, increasingly have the multiple purposes of aiding the victim, educating the public, and lobbying for legislation. Although media coverage is not always sympathetic or supportive, the continued movement in a serious direction occurs when the public increasingly identifies with the issues rather than the vein in which they are presented. This process is aided by keynote individuals in positions of power—Katz's (1957) opinion leaders—who will demonstrate support for the more serious side of the issue.

*Stage 3: Coming Forth.* With increased public awareness, a number of new factors emerge. Victims, at least some of them, now perceive their situation differently (they perceive that "this happens to other people too"). Being a victim becomes something one can begin to talk about; in fact, the victims who do come forth through hot lines and other sources give information that enables experts to construct hypotheses about the true number of victims and the reasons that other victims do not seek legal remedies. Information on the abused wife, the rape victim, and the abused child indicates that the overriding problem in requesting help is fear. Fear serves as a reason for nonreport at all levels and at all ages. In child abuse it is obvious that "an infant or very young child, even if he lives, cannot tell the story of how the trauma was inflicted; and many children old enough to speak will remain silent out of fear of their parents or, oddly enough, fear of what might happen to their parents" (Fontana, 1976, p. 25). For the adult victim the nature of the fears are different but no less powerful. For example, Gager and Schurr (1976) report that women who have been raped and contact crisis centers for help have a fear of their assailant's returning, a fear of being alone, a fear of venereal disease and pregnancy, a fear of bad treatment by the police, and a fear that their relatives and friends will find out what happened.

These victims, although not always ready to pursue a legal remedy, will often emerge far enough to work with the experts who deal with victims (physicians, psychologists, sociologists). This cooperation then results in an increased focus on the issue and increased public awareness of the issue. The experts "discover" the situation and define it as an area of increasing concern. One unfortunate consequence of this action is the displacement of volunteer nonprofessionals by recognized "experts"; a more positive result is the delineation of specific

recommendations and techniques by which the public can be engaged in the issue. Specific recourses (such as hot lines, police, and counseling centers) are formulated for the victim and the witnesses of the violent events.

*Stage 4: Public Policy.* The increased public and expert interest, coupled with the "coming forth" of the victim, gives rise to specific legislation, changes in legislation, or mere awareness of existing legislation which is designed to deal with the violent act. This act of violence is now seen as a legitimate reason for public intervention to secure the legal rights of the victim, and the courts now become an active force in these previously private issues.

In 1874, a nurse named Etta Wheeler was going about her rounds when her attention was called to the plight of a nine-year-old child named Mary Ellen. Concerned neighbors in the tenement house where the child lived told the nurse that, in their opinion, Mary Ellen was being seriously maltreated by her parents. Nurse Wheeler investigated and found the child to be chained to a bedpost in her parents' apartment. Mary Ellen had apparently been beaten often, for her body gave evidence of severe bruises in various stages of development, and she was pitifully undernourished from her diet of bread and water. Etta Wheeler and interested church workers promptly brought the matter to the attention of the police authorities, including the district attorney, only to discover that they could take no legal action to remove the child from her dangerous environment. There was no law to cover such a situation, no agency with the power to interfere. The parents, exercising their absolute rights to bring up their child in the manner of their choosing, literally had the whip hand.

Out of desperation, the nurse and her church worker friends appealed to the Society for the Prevention of Cruelty to Animals on the grounds that the child was a member of the animal kingdom and was being accorded worse treatment than the lowest of animals and, therefore, qualified for the society's protection. The society agreed that Mary Ellen's case fell under the laws governing the treat-

ment of animals and had the child removed from her home on those grounds. . . . One year later, in 1875, the first Society for the Prevention of Cruelty to Children was organized in New York [Fontana, 1976].

As citizens, we hear much about victims' having problems with the law, or lack of laws. Many of these difficulties can be classified under two major headings: (1) confusion, contradiction, and ambiguities that have appeared in the existing laws; and (2) a lack of knowledge by the victim—and, indeed, by the public—of the intricacies and specifics of the legal process. For example, the legal definition of rape is a situation where a male compels a female to submit to penile-vaginal sexual intercourse. From this very limited definition, on which rape laws are based, we can immediately note that many so-called "rapes" (and rightly called, as far as the victims are concerned) are acts of anal or oral sodomy and do not fall under the definition of rape; these acts often result, therefore, in legally lesser crimes and lesser penalties. Once a rape does occur, three pieces of evidence are necessary for legal prosecution: evidence of sexual penetration, force, and unwillingness to participate on the part of the victim. Frequently, women who have reported rape complain that they were humiliated or "raped again" by the police, the prosecutor, and the judge. Although, unquestionably, many of these complaints are valid and result from the attitudes of the law enforcers, at other times the complaints result from the victim's ignorance about the reason for certain questions and her lack of knowledge about the evidence needed for a rape conviction. This lack of knowledge *can* (for some of the issues) result in an "unfounded" rape, a term used when the police do not recommend prosecution because the victim delayed reporting the crime, because there was a prior relationship between victim and the assailant, because there was no evidence of force, or because the behavior of the victim was questionable. As previously stated, some of these behaviors (particularly the delay in report and destruction of evidence) result from ignorance of the law. In these cases change has occurred through the actions of women's coalitions. More recently, these groups, in conjunction with police departments and federal task forces, have demystified laws to victims, have attempted to change inappropriate laws, and have provided a legal escort service to aid the victim through the legal process. Other aspects of unfounded rape (par-

ticularly those referring to the victim's past behavior, the victim's knowledge of her assailant, and proof of force) require legal change. The following case illustrates how legal intricacies can place the woman's behavior, rather than the assailant's, on trial.

He lived in my apartment building, and I kept meeting him in the elevator and the laundry room. He introduced himself, and one evening, after several months of casual conversations, I accepted his invitation for a drink and dinner at his apartment. When I got there he said we'd go out for dinner and after a couple of drinks he began making advances. I left, telling him he had misinterpreted me. A couple of weeks later he knocked at my door and said he wanted to apologize. As soon as he was inside, he hit me in the face and called me "slut" and "whore." He knocked me down, tore off my pants, and, despite my struggles, raped me. . . . The detective said it would be easy to get a conviction for assault, but, because I let him in, it would be practically impossible to get a conviction for rape [quoted in Gager and Schurr, 1976, pp. 15-16].

Some changes have already taken place. For instance, most states have eliminated the questioning of prior sexual experience of the victim. Further legal problems have been highlighted and will be worked upon through women's coalitions and national task forces.

Similar to the rape laws, the prohibition of assault and battery, under which wife abuse falls, exists in every state of the country. However, legal enforcement of these laws is uneven and often unknown to the victim. For example, in most misdemeanor cases a police officer must witness the act occurring, or a warrant needs to have been previously issued. Furthermore, in New York at least, unless the woman insists upon and claims an emergency, she will not be allowed to see an intake officer for two to three weeks. She then must secure a Temporary Order of Protection, and then, after several more weeks, she will have a court hearing before a judge. A victim, therefore, must be aware of the timing involved; must know that under her insistence and in emergency cases the procedure can be speeded

up; and must know of alternative plans of prosecution. For example, one alternative is prosecution through the district attorney's office; however, needed here will be witnesses and documents attesting to the crime, plus evidence of severe injury and testimony of the victim. As Martin (1976) notes, at the Bureau of Family Relations in San Francisco, only eight of several thousand cases for 1973-74 led to formal complaint and prosecution. She also notes that "legislation is necessary to change the legal situation in which wife beaters currently escape prosecution more often than not" (p. 175). Again, through pressure of the women's movement, certain legal ambiguities are slated to be or have already been cleared up (for example, Florida has passed a law permitting arrest for probable cause for a misdemeanor). Finally, from the growing number and increased power of task forces devoted to this issue, numerous bills have been introduced. Of particular interest and related to our problems of definition is a pending Pennsylvania law that would protect cohabitating partners from abuse (this is a change from "married" partners). (The reader is advised to see Martin for a full discussion of remedial legislation.)

In our view, however, the most important change for the particular issues of rape and wife abuse have taken the form of support groups. Specifically, escorts now accompany rape victims through the legal process; and temporary shelters have been set up to house abused wives and their children while the legal process takes effect.

*Stage 5: Enforcing Legislation.* Unfortunately, the problem of controlling violent acts does not end with the creation of new laws. For even when protective laws do exist, problems in enforcement continue to exist. We can categorize the difficulties in enforcement under two subheadings: (1) attitudes of law enforcers toward the victim and (2) attitudes of the victims toward themselves.

Within the first category, the emerging violent acts are often given low police priority. Not only do law enforcers give "domestic squabbles" (the frequent euphemism for wife abuse) low priority and therefore take a long time to respond but, once the case is tried in family court, where the goal is reconciliation, a woman may find her husband back out on the street again, with no protection provided for her or her children: "Although protective orders are commonly issued against violent husbands, enforcement is practically nonexistent" (Martin, 1976, p. 103).



Similarly, individual attitudes still interfere with the enforcement of rape charges. The police, who are merely individuals drawn from the larger society, will reflect society's attitudes toward victims. And, since society often believes that the woman's behavior precipitated an act, the police are often found to be subject to the same type of thinking. Gager and Schurr (1976, p. 65) note that "Ironically, while the police are primarily responsible for preventing rape, responding to victims, and solving cases, most of them are male, and, like other men in the street, they share the prevalent social attitudes condoning rape." It should be pointed out, however, that the harassing of a victim, as a general rule, tends to occur primarily in three situations: when the victim is a minority woman, when the law enforcer has not had special training in dealing with the particular crime, and when policemen instead of policewomen are exclusively used.

Unfortunately, harassment of the victim and support of the rapist can occur at all echelons of society. In May of 1977, for example, a Madison, Wisconsin, judge ruled that a 15-year-old boy who had raped a girl at the high school that both were attending was reacting "normally" to the current sexual permissiveness and women's provocative clothing. The judge ruled that the boy, who was found delinquent, should be permitted to stay at home under court supervision rather than placed in an institution or other rehabilitation center. "This community is well known to be sexually permissive," the judge said. "Should we punish a 15-year-old boy who reacts to it normally?"

Some of these attitudes are grounded in a misunderstanding of the victim's actions or lack of action. Rape victims are often asked why they did not fight back to a greater degree (especially when the threat of force rather than direct force was used); similarly, the battered wife is often asked why she stays with her husband. The answer is the same in both instances. Just as the rape victim fears her assaulter, the battered wife fears her husband. Fear in these situations can be of such magnitude that enforcement of existing laws becomes all but impossible. A victim's fear of reporting the rapist and the abusive spouse revolves around fear of reprisal; and, given the time-consuming legalistic procedures previously discussed, this fear is well founded. The future safety of the victim between the time of complaint and the initial appearance in court is rarely considered. This holds true for the victims of rape, child abuse, and wife battering.

Another issue, usually secondary to the attitudes of the enforcers, concerns the attitudes of the victims themselves, which can also impede the enforcement of existing laws. The rape victim, who is also a product of society, may wonder whether she struggled hard enough, whether she precipitated the attack, or whether the crime was in any way her fault. Guilt and shame are often internalized by the victims of these acts, so that they too display the prevalent attitudes of society. A newspaper editor reports the following incident: "She is fifteen. She lives in a black community which prides itself on its 'upper-class' image and refers to poor blacks as 'niggers.' She was raped twice. Her mother wouldn't talk to me because she was so ashamed. I got the story from a black policeman and a black inspector. The day after I printed the story—without naming names but indicating the section of town to point up the lack of police protection there—my paper was flooded with angry telephone calls from residents. They said I had given their neighborhood a 'bad name,' and that the girl had 'brought it on herself' " (quoted in Gager and Schurr, 1976, p. 11).

Similarly, the victim of wife abuse may experience shame and guilt to the point that she can even justify the behavior of her spouse. "He hit me once. It wasn't very long ago. The baby was about two months old—July—we were fighting about something. I have a habit of not keeping my mouth shut. I keep at him, and at him. He finally turned around and belted me. It was my fault, I asked for it" (quoted in Gelles, 1974, p. 59).

*Stage 6: True Control.* In our discussion of public policy, we noted the many difficulties that victims often have in obtaining justice. Under the system of true control, a victim or group of victims with a legitimate problem would receive immediate attention from the legal system. Vague, unfair, or inadequate laws would be scrutinized in an effort to obtain a more equitable system. Although some readers may take issue with this point and claim that it is attitudes, not laws, that need change, the fact remains that one cannot legislate attitudes. We feel that strong laws, with their concurrent enforcement, can often result in behavioral changes. These behavioral changes will lead to changes in attitudes for many individuals. As Festinger (1957), in his theory of cognitive dissonance, shows, when a person's behavior is inconsistent with his underlying attitudes, his attitudes frequently change in the direction justifying the behavior. As for the rest of the citizenry, whose attitudes remain unaffected, the changed behavior will, at the very least, provide a more equitable model for the future generation.

In terms of enforcement, we must recognize the need for special efforts that go far beyond the usual bureaucratic network. We need specialized investigators who are aware of the complexities of these particular issues and who are trained not merely to perform some particular unidimensional task, such as detection or prosecution or counseling, but to treat the situation and the individual as an entire entity and thereby avoid the compartmentalization of knowledge and help that so often impedes the enforcement of the legal system and traumatizes the victim even further than the original act itself. In the areas we have discussed, some of the first individuals at the scene of the act must not only be prepared to gather legal evidence for prosecution but must simultaneously provide shelter and psychological support for the victim.

The crux of true control must focus on the victim rather than the assailant. Under a system of true control, victims would not have to struggle for justice because they are the minority of the population. Rather, the larger population would empathize with the victim—a feeling that this could have happened to anyone—rather than seeing the individual as a “deserved victim” who precipitated and thereby justified the violent act.

# Prevention of Violence

*Benjamin B. Wolman*



Violence is an act that aims at the destruction of a person, an animal, or an object. According to Hebrew and Roman mythologies, the first acts of violence were fratricides: Cain slew his brother Abel, and Romulus killed his brother Remus. Cain was driven by envy; Romulus was driven by his desire to protect his rule and power. At the same time, almost all ancient nations believed in a golden era of peace and love, and prophets and poets yearned to restore such an ideal social order, where the brotherhood of men would exclude any possibility of violent conflict. If mythology can be used as a source of psychological analysis of human feelings and thoughts, the story of Paradise carries a highly significant message. According to the Old Testament, Adam and Eve lived in peace and friendship in Paradise. There is no indication of any discord or disagreement between

the first human couple. Adam and Eve were expelled from Paradise not because they ate from the Tree of Wisdom and realized that they were naked (since, according to Genesis 3:21, the Lord himself made "coats of skins and clothed them") but for another reason: "And the Lord God said, Behold, the man is become as one of us, to know good and evil: and now, lest he put forth his hand, and take also of the Tree of Life, and eat, and live for ever: Therefore the Lord God sent him forth from the garden of Eden, to till the ground from whence he was taken" (Genesis, 3:22-23). Eating from the Tree of Life would have made Adam and Eve immortal and thus godlike.

According to that story, human beings remained mortal and thus weak and vulnerable, for immortality is the only relevant sign of power. Only God cannot be killed, cannot be hurt, and is therefore omnipotent. Human beings are mortal, and their power is therefore limited.

Power can be defined as the ability to satisfy needs. All living organisms have fundamental needs, such as the need for oxygen, food, water, rest, shelter, and sex; they also have acquired needs, such as being accepted, loved, protected, and respected. The highest point of power, omnipotence, necessarily includes immortality. Obviously, no human being can attain it; but good health, physical strength, a good mind, possessions, and allies enhance one's power. Small wonder that people in all times and all ages have aspired to accumulate maximum power. Many people accumulated material possessions, built castles and palaces, and wore spectacular clothing to impress others with their power and to deter potential enemies; some other people organized armies and waged wars of conquest (Scott, 1973; Wolman, 1977).

Apparently, the feeling of power is almost as important as, and sometimes even more important than, the possession of it. One can readily trace the feeling of *elation* to high estimate of one's own power and the feeling of *depression* to loss of power and subsequent weakness. The highest point of power is eternal survival; the zero point of power is death. Thus, people in elation at its manic peak feel that nothing can happen to them, and people who reach the bottom of depression are prone to commit suicide (Montagu, 1955; Ransford, 1968).

The idea of omnipotence is intrinsically related to creativity. The concept of God as representing human craving for immortality coincides with the endowment of unlimited creativity. Only God as the personification of that idea could have

created cosmos out of chaos, something out of nothing. The greatest power that human beings can have is creativity. The great monuments of architecture and the masterpieces of art and literature reflect the human striving for power and its dreams of immortality.

Power can be used in two directions: to satisfy needs or to prevent their satisfaction, to create or to demolish, to protect life or to destroy it. Strangely enough, it is much easier to destroy than to build, to demolish than to create. Building a magnificent architectonic structure or painting a masterpiece requires unusual talents and a tremendous amount of work. But one little match can destroy the greatest painting, and one incendiary bomb can demolish the most beautiful building. People who have little power, especially if they are aware of their weakness, may be prone to embark upon the easy way of showing power that they do not possess. That insecure people try to dominate others can be readily noticed in the behavior of obsessive-compulsive neurotics, who impose rigid order on their environment and adhere to strict rules. Their inner insecurity—that is, doubts concerning their own power—is the main source of their dictatorial behavior (Wolman, 1972, 1973b).

Fear and aggression are Siamese twins. The more one fears, the more one is prone to hate and to act in a destructive way. All animals fear death, but only human beings have combined the fear of death with the knowledge that death is inevitable. The fear of death common to all living nature is the main source of anxiety in human beings. Strivings for self-aggrandizement, material possessions, and glory are the positive aspects of the human futile craving for absolute power and immortality. Unfortunately, there is much more on the negative side of that striving; envy, competition, jealousy, paranoid fear of true and imaginary enemies, morbid anticipation of catastrophes, and self-fulfilling prophecies of wars are daily occurrences in practically all cultures in all times. Was Melanie Klein totally wrong when she hypothesized the initial paranoid position of neonates (Sears, Maccoby, and Levin, 1957; Spitz, 1945)?

In clinical practice one comes across several cases of overt and covert inclination toward violent acts. Most violent acts are committed by people with acute feelings of inferiority and rejection and paranoid delusions of persecution. People who feel secure do not expect everybody to love them and can take in stride the inevitable ups and downs of human fortune. Immature and insecure individuals are less capable of accepting frus-

tration and rejection and are prone to fight back in alleged self-defense. Psychopathic individuals, whom I classify as hyper-instrumental, narcissistic types, are more inclined toward anti-social behavior than any other clinical group. Most of them believe that they are innocent victims of injustice and that they have to defend themselves against a cold and hostile world. When they perpetrate a crime, they believe that they were justified in whatever they did. Most psychopaths whom I have treated in private practice and in hospitals maintained that their victims were guilty, or that they were provoked to act in self-defense, or that they had to get even with society, or that they were entitled to material gains. Some of them used force for self-aggrandizement or, as they described it, "for kicks." (See Feagin, 1968; Fromm, 1941; Horney, 1939.)

Paranoid schizophrenics are prone to violence under the influence of their ideas of persecution and reference. Schizophrenics have been brought up by overdemanding parents, who made their children feel inferior, inadequate, and guilty. No matter how hard the child tried to please his overdemanding parents, he was doomed to fail and to be accused of being ungrateful and unfriendly. As a result, schizophrenics are full of repressed hostility; they fear expressing it, and they feel guilty for harboring such feelings. Some of them go into catatonic stupor, aimed at preventing themselves from acting out pent-up hostility. Paranoid schizophrenics project their hostility onto others. Having assumed that they are victims of aggression, they can justify their own hostility and perpetrate acts of violence.

Perhaps our clinical experience can offer some clues for dealing with hostile feelings and acts of violence in this society at large. Some people believe that hostile feelings and proneness to violence should be controlled by the superego. Philosophers, theologians, and moralists ascribe great powers to human conscience and moral feelings. Unfortunately, these moral restraints have not been too successful. Religion in all its denominations has been spectacularly unsuccessful in controlling human hostilities and restraining violence in human relations, and Immanuel Kant's categorical imperative has not prevented one single act of violence. Moreover, the moralistic superego has often been used to justify hostile acts of violence; religious convictions led warriors, crusaders, and inquisitors to commit the most atrocious acts against humanity. Every adventurer, fanatic, and despot has used beautiful religious, nationalistic, or other rationalizations to justify his aggression and cruelty. Many a schizoid character

has incited people to massacres and pogroms in the name of God, justice, and other lofty ideals (Berkowitz, 1962; Jackson, 1960; Lewin, 1935; Wolman, 1958b).

Certainly, one need not dismiss the role of the superego in strengthening one's control apparatus. A proper education of children in the spirit of true democracy and equal rights for all human beings is not a factor to be dismissed or treated lightly. However, the realistic ego is a much more potent guiding factor than the superego; in clinical practice as well as in social policy, one can rely more on the ego than the superego. One can use ego therapy on two levels. On the lower level, one appeals to the *reality principle*, in contradistinction to the *pleasure principle*, to postpone immediate discharge of energy and deny gratification that may bring adverse consequences. Mentally disturbed people may not be able to get a clear estimate of the potential results of their behavior; thus, they may act on impulse. Impulsive acting follows the pleasure principle; delayed, reasoned-out actions based on anticipation of the possible outcome follow the reality principle. A great many acts of violence are committed by people in a mob; mob psychology weakens individual superegos and is often inspired by the morbid superego of a malicious leader. Moreover, the awareness of consequences is substantially reduced by mob participation, and the "security in numbers" may create the feeling of unlimited power leading to unpunishable acts. Pathologically permissive and pseudoliberal attitudes greatly contribute to a mob psychology in our cities and are, therefore, at least partially to be blamed for the increase of violence. The feeling that one can get away with murder destroys one's reality principle and facilitates a mass regression into id-driven acting out (Freud, 1940; Wolman, 1971, 1973b).

### Phases of Moral Development

Developmental psychology can supply highly significant data concerning restraint from antisocial and violent behavior—data that can be utilized in a strategy aimed at the prevention of violence. Most children, unless exposed to a morbid parent-child interaction or affected by a severe organic disorder, slowly grow according to certain developmental phases. These phases can be described as follows (Wolman, 1973a):

1. The earliest primary, amoral narcissism. This is a phase of



- amoral anomie. The infant follows the id and the pleasure principle and must be restrained from without.
2. The beginnings of the ego and the reality principle. The child refrains from hurting others because he fears retaliation and defeat. This is the phase of primitive phobonomous morality.
  3. The origins of the superego, based on a combination of fear and love. Through the introjection of parental images and acceptance of their values and regulations, the child begins to learn self-restraint and a higher heteronomous morality.
  4. The development of mutuality. As the child grows older, he or she learns give-and-take relations. Adolescents identify with the peer group and willingly accept the group's norms. They develop the we-ego and have entered the phase of socionomy.
  5. The development of responsibility. Mature men and women do not need group pressure. They are strong and courageous and enjoy giving more than taking. Their high moral standards are based on their vector-ego. They have reached the highest moral level of autonomy.

The following pages describe the above-outlined developmental phases.

*The Anomous Phase.* The beginnings of human life are parasitic. The not-yet-born child and the neonate are helpless creatures whose survival depends on supplies and support from without. At the earliest phase of life, the infant needs to receive love, affection, and care, and his attitude to the outer world is exceedingly instrumental; that is, he relates to other people with the aim of having his needs taken care of by them (Wolman, 1956, 1958a, 1960). The infant's taking, in contrast to his mother's vectorial (giving) attitude, is the prototype of instrumentalism. Some degree of rational instrumentalism remains throughout the entire human life, and it is the necessary element in all breadwinning functions.

The infant's emotions are invested in himself; thus, he is narcissistic, has no inhibitions, is driven by id impulses, and operates on the principle of immediate gratification (the so-called pleasure principle). He has no concern or consideration for anyone, and whenever necessary he must be restrained from without. He has no self-restraint; he is anomous. Only severe psychopaths (sociopaths) remain all their lives at this infrahuman level (Lorenz, 1964; Pavlov, 1928; Plotnik and Delgado, 1971).

*The Phobonomous Phase.* The first and lowest level of morality is based on fear of retaliation, pain, and defeat. Even the most primitive ego is capable of a realistic reaction to a threat and some degree of self-restraint. This ability to avoid pain and to control one's pleasure principle grows gradually and permits the individual to live with other people. He may still be very selfish and instrumental and tend to exploit and use other people, but the fear of retaliation prevents him from gross antisocial behavior.

By exploiting the individual's fear of being defeated and hurt, one can often effectively prevent violence. Many individuals are tempted to use force for gain (robbery), for sexual pleasure (rape), or just for the feeling of power (for kicks). They will do it as long as they know that they can get away with it. The use of overwhelming power is a fool-proof *short-range* method of preventing violence. No hoodlum, rapist, mugger, or "revolutionary terrorist" will singlehandedly attack armed guards. The mythological Greek goddess of justice was portrayed as holding scales in one hand and a sword in the other. Justice without power is a mockery, and ineffectual wishy-washy guardians of peace and justice invite violence.

The earliest and most primitive level of self-restraint, then, is phobonomous; that is, morality (if one can call it morality) based on fear.

*The Heteronomous Phase.* The second and higher level of moral development originates in a combination of fear with love. Children of rejecting or overpermissive parents may never reach the second level and all their lives act in a selfish and hostile manner. Parents who are both firm and friendly, who love and set limits, who prevent antisocial behavior rather than punish it facilitate the child's growth and foster the transition to the next development phase. A preschool child is capable of loving his parents and loves them most when he feels that they love him and set limits to his freedom. Their firm and loving attitude gives him a much-needed feeling of security and teaches him to postpone his wishes and, if necessary, to renounce them. At this phase he loves and fears his parents and does not dare to alienate them or invite their disapproval.

The necessary combination of love and fear starts at the anal phase, at the time of toilet training. The mother asks the child to renounce his freedom to eliminate whenever and wherever he pleases. The too permissive mother misses the opportunity to teach the child to willingly accept the necessary

limitations of his freedom and to comply with the norms of the society he must live with. By imposing restraints without undue harshness, by encouraging and rewarding compliance, she helps the child to grow in the process of socialization based on a fusion of love and fear.

Love elicits love; and kind, loving, and affectionate parents foster love in their children. Being firm in their do's and don't's, they facilitate the process of identification which leads to the formation of the superego.

As early as the second or third year of life, at the time of toilet training, the infant's fear of punishment and his need for affection and protection induce him to willingly obey parental demands. Gradually the infant internalizes these do's and don't's and considers them his own. The child develops a dislike for playing with feces because his parents dislike it. These internalized prohibitions and self-restraints are "forerunners of the superego"; they contain the internalized fear of punishment and conformity with parental demands.

The fear of punishing parents comes to its peak at the phallic phase (around 4-5 years of age). At the time of the oedipus complex, the little boy, motivated by castration fear, is forced to give up his mother as a love object; and the little girl, under the threat of losing her mother's love, is forced to abandon the father as her love object. The frustrated child of either sex regresses from object relationship to identification by introjection. The introjected parental figures are idealized and seem to be more powerful than they really are.

The superego is the "voice" of the parents and of their moral standards as perceived by the child; it also represents parental wrath and punitive attitudes. Primarily, then, it reflects a striving toward perfection and an effort to live up to the expectations of the parents. At the same time, it can be partly irrational and impose excessively rigid restrictions. Freud (1940) described it as the "sum of all limitations in which the ego has to acquiesce, and for that reason the abrogation of the ideal world must necessarily be a magnificent festival for the ego, which might then once again feel satisfied with itself."

The development of superego sets a pattern for the complex process of moral development. The superego evolves out of combination of fear and love. At the beginning it is more fear than love. The infant complies with parental demands out of fear of punishment, and the threat of abandonment is the most severe threat—for an abandoned child may not be able to sur-

vive. To get milk brings immediate gratification, but to be sure that the milk is forthcoming elicits the feeling of security. Parental affection, holding, and hugging give such a feeling to the infant. He feels protected and cared for—that is, loved. Love elicits love. Parental love that makes the infant feel secure elicits the desire to reciprocate and to please the protectors. Parental love for the infant is vectorial; the infant's love for the parents is instrumental. He loves them because he needs them, because their survival and well-being are prerequisites for his survival and well-being. Instrumental love signals the second phase of moral development; the restraint from unlimited selfishness becomes a combination of the old fear (from without) and the new love (from within).

*The Socionomous Phase.* The gradual shift from fear to love is indicative of several psychological changes. As the infant grows and gets stronger—that is, more capable of satisfying his own needs—his fears gradually decrease, and he becomes more daring. The progression from fear to courage is perhaps the most relevant aspect of personality development. And this is also the general direction of moral development: *from weakness to strength, from external restraint to internal, from instrumentalism to vectorialism, from fear to courage, from taking to giving.*

Interaction with peers leads to the third phase of moral development. The social relations enter the phase of mutualism, and the inner force of we-ego emerges. As the individual begins to identify with a group and to share responsibility for the social norms, a higher phase of development, the socionomous phase, begins. Instead of abiding by heteronomous rules (imposed from without), the individual now takes part in setting rules for himself and others. The parental norms incorporated in the superego undergo gradual changes. The child interacts with other children; he learns in school, and he attends a church or a temple. In addition to parental authority, he faces the authority of the teachers and other adults, whom he learns to respect and obey.

Identification with a group increases one's feelings of security and power. The group may develop a group spirit (*esprit de corps*) and make the individual feel not like a child who obeys his parent but like an individual who obeys the rules he took part in establishing. The individual's consideration for others gains an additional force, the in-group-ego or we-ego. The formation of the we-ego follows a similar pattern to the formation of the superego. Preadolescents and adolescents tend to

identify with those in power. Sharing of group norms is a paradoxical phenomenon. The group members attain a higher level of personality development by taking part in setting the values of their group and willingly honoring them, although the *content* of their values is not necessarily higher than those advocated by the parents.

Many contemporary parents, however, are either unable or unwilling to exercise their authority; instead of guiding their growing children, they try to please and bribe them. Lack of guidance and excessive permissiveness at home foster lack of respect on the part of adolescents. Having little faith in and respect for their parents, they generalize this attitude to include the teachers and the entire adult world. They fall prey to an atmosphere of moral nihilism and believe themselves to be rebels. Unfortunately, they have nothing to rebel against and often nothing to fight for.

However, history has proved that young people can be motivated by a high degree of idealism. This idealism can reveal itself in a variety of ways, depending on the prevalent cultural values and on guidance given to the youth. Though the impact of organized religion has considerably weakened, the search for the ultimate truth has led many adolescents back into the religious community, which, unfortunately, may not find the way to convey its moral principles to the young generation. In some countries youth are encouraged to take an active part in promoting socially useful goals. Vexatious tasks enable young people to identify with the society at large and take pride in serving it. In Yugoslavia young people have been encouraged to volunteer in building badly needed roads. In the Soviet Union youth are called upon to form initiative groups with social purpose. In the United States young people can volunteer for Peace Corps work or for work in hospitals and various social service organizations.

Joining a voluntary group facilitates the development of group identification and we-ego. Practicing rather than preaching attracts youth; when society at large or particular social movements call on youth, set an example, and demand self-sacrifice, they open new vistas for a higher moral development. The superego implies acceptance of existing moral norms conveyed by parents and other authority figures. The we-ego means *active* participation in shaping of moral norms and *active* responsibility for their implementation.

When young people rebel against old and fossilized social

systems, the ideas and morals preached by some courageous adults could serve as an anchorage for the rebellion. For instance, when groups of university students in Czarist Russia rebelled against the oppressive system, they were inspired by great Russian writers who protested against the autocratic rule and slavery. The members of the revolutionary youth movements called *Zemlia i Vola* and *Narodnaia Vola* were opposed to the traditional values as represented by the older generation. They left their parents' palaces and mansions and worked on farms and in factories. They did not take drugs or practice sexual orgies or travel around the world charging the expenses to their parents. Their rebellion was genuine and sincere, and their actions were permeated with the ideals of self-sacrifice and service for humanity inspired by a Tolstoy and a Kropotkin.

Something similar happened to large segments of the Jewish youth in Eastern Europe. The traditional educational system was based on the study of Talmudic laws developed thousands of years ago. The great French Revolution and the March Revolution in 1848 brought to the ghettos the ideas of equal rights for *all* people, irrespective of creed, race, and ethnic differences. A powerful movement of emancipation and enlightenment spread among the young generation of Jews in Eastern Europe and created the Zionist cravings for national identity and return to the land of Israel. The older generation was waiting for the Messiah to come, but thousands of young men and women left their parental homes and went to create a new life in the Promised Land, where they turned swamps and wasteland into a blooming oasis and prepared homes for their persecuted brothers.

They lived in the socionomous community of Israel, feeling responsible for each other. Soon they reached a higher level of moral development—of the vectorial responsibility for those who needed their help. They built a house for those who had no place to go. They became their brothers' keepers.

*The Autonomous Phase. Responsibility* is the core concept of morality. Infants are unable to assume any responsibility; they are weak, anomous creatures, unable to restrain their infantile-animalistic impulses. Their parents must assume responsibility for their behavior and impose restraints. As the children grow and get stronger, they identify themselves with their parents and other significant adults, and willingly accept the parental do's and don't's. Their behavior becomes heteronomous, and their responsibility is a borrowed one. As they become more

mature and capable of group identification, they take an active part in setting rules and norms. Their behavior becomes socionomous, and they share responsibility with their group.

At its highest level, morality has outgrown the survival interests of a particular group or society. It is universal, for it encompasses the entire human race. It is a new level of development, transcending the heteronomous superego and the socionomous we-ego and substituting the vector-ego, which implies courage of one's own convictions and moral commitment to one's brothers, to all human brothers. The vector-ego is the supreme personality agency of mature and self-confident and self-respecting individuals. A person who has developed a vector-ego feels that he is his brother's keeper and voluntarily assumes moral responsibility for whatever goes on in himself and around him.

One must be strong to be able to give. Children and immature adults cannot be parents. Being weak, they tend to be takers, and they emotionally rob their children. Mature parenthood is the basis for all moral systems; by being vectorial, it facilitates the child's growth toward vectorial morality. Moral growth need not be restricted to childhood and adolescence. Human life can be a process of continuous growth. The vector-ego may start with parenthood and assumption of responsibility for one's children, but it can grow and encompass all human children and all human brothers.

Becoming is synonymous with moral development, which proceeds from irresponsible anomie, through the borrowed responsibility of heteronomy, toward the shared responsibility of socionomy. The next and the highest level of becoming is the individual's own responsibility—the level of autonomy.

Autonomy means rules and commandments imposed from within. It implies a total and unreserved responsibility for whatever is going on. It is the moral obligation to fellow men—to all men, women, and children. It is the ever present readiness to be of help to those in need.

The ancient Persian religion of Zarathustra (Zoroastrianism) did not use punishment and reward as moral devices. It appealed to the innermost feeling of responsibility. According to this religion, the world is divided between the forces of light, symbolized by Ormuzd, the lofty God of Light, and Ahriman, the evil God of Darkness. The struggle between right and wrong, just and evil, love and hatred goes on in every human heart. Good deeds support Ormuzd; evil deeds help Ahriman. It is up

to every human being to take sides in this struggle, and every single individual is responsible for its outcome. Every human being is free to choose between love and hate. There is no reward or punishment, but only moral responsibility.

Jeremiah condemned his sinful compatriots. The ancient Egyptian king Akhnaton introduced monotheistic faith in a single god, Aton, against the powerful pagan priests. Christ proclaimed love and charity—against the materialistic and oppressive Roman Empire. Jan Hus was burned alive when he called for revival of Christ's moral principles. Martin Luther fought against papal corruption. Giving does not impoverish those who give. Responsible parenthood, as the prototype of vectorialism, proves beyond a doubt the idea that giving enriches the giver. Loving parents are not emotionally impoverished; the more love they give, the more love they have. The more energy one uses, the more access he gains to the deeper layers of his psyche. Consider a gold mine; those who trample on the surface picking the bared gold pieces do not save their gold resources, but those who dig deep gain access to real treasures. Heteronomous individuals who obey orders from without use as much energy as is demanded from them. More energy is used by socionomous individuals, who take an active part in the group decision-making process. But maximum energy is revealed by autonomous individuals, who are free to use all their energies at will. Free spirits can produce many times more than mental slaves. People who have the courage to be themselves, who are free to live the way they want and set their own goals, gain access to their hidden energy sources. People who yield to every temptation and are unable to control themselves are not free. They may become slaves to alcoholism, drugs, and violent behavior. Their conscious ego has no power, and they float on the waves of life like a ship without a rudder. They are at the mercy of their momentary impulses, pushed around by their own weakness.

Freedom means the freedom to make one's own decisions. Freedom means the power to control one's behavior, to set goals in life and vigorously pursue them. Freedom to think and to develop new ideas and to choose one's way in life must not be confused with regression to infantile modes of behavior. One cannot reverse the developmental process, and whoever tries to turn a tree into a sapling will ruin the tree. Immature men and women do not become children again; instead, they become disturbed, maladjusted adults (Wolman, 1977).



Genuine freedom is attained through autonomy of the human mind. People capable of reasoning and deciding, of giving orders to themselves, of exercising full control over their cravings and desires are free human beings. The free spirits are those who create new ideas, new forms, new melodies, new works of art and science. Creativity cannot thrive under dictatorship. The freedom to reject the past and to bring new and fresh ideas is the sociocultural prerequisite for productive work. All great artists, scientists, and inventors were people who harnessed their innate talents and exercised enormous self-discipline. And the greatest among them—Prometheus, Moses, and Christ—gave all the love they had to all people. They were ready to renounce everything, even their own lives, and thus reached the highest level of power—the power to love and to give.

### From Discipline to Self-Discipline

Human beings are helpless takers at birth. They need help and guidance to grow stronger and capable of giving. The wonderful task of helping them in the process of becoming is called education. Education must help children to grow strong and make them aware of the power they have. It must give them the courage to use the power—the courage to give.

Education resembles gardening. Plants usually grow by themselves, but in adverse conditions they may not be able to grow at their best or even to grow at all. The universal, biological, immanent goal of education in all countries and at all times is to facilitate the growth from childhood to adulthood.

The presence of overwhelming force ready to prevent antisocial behavior is an immediate, short-range method of preventing violence. The New York City and New York State officials could have easily prevented looting, rioting, and violence on the night of the July 13, 1977, blackout. Calling in of National Guards could have *prevented* violence. But the question is not how to prevent a particular act of violence but how to prevent its recurrence. A thorough preventive action cannot rely on guns but on education.

Unfortunately, too many parents have abdicated their parental responsibility. Too many of them do not impose moral standards, and some of them have none. The job of prevention of violence in our society cannot be done by police or even by well-wishing psychologists and educators. It requires the cooperation of the entire society, of all of us.

# References



- Abel, G. G., Barlow, D. H., Blanchard, E. B., and Guild, D. "The Components of Rapists' Sexual Arousal." *Archives of General Psychiatry*, 1977, 34, 895-903.
- Abel, G. G., Blanchard, E. B., and Becker, J. V. "An Integrated Treatment Program for Rapists." In R. Rada (Ed.), *Clinical Aspects of the Rapist*. New York: Grune & Stratton, 1978.
- Abeles, H., Plew, R., Laudeutscher, I., and Rosenthal, H. M. "Multiple-Drug Addiction in New York City in a Selected Population Group." *Public Health Reports*, 1966, 81, 685-690.
- Abrahamsen, D. *The Psychology of Crime*. New York: Columbia University Press, 1964.
- Adams, J. E. "Lobectomy Ends Violent Episodes in Two Patients." *Journal of the American Medical Association*, 1973, 226, 19-20.

- Adams, J. S. "Inequity in Social Exchange." In L. Berkowitz (Ed.), *Advances in Experimental Social Psychology*. Vol. 2. New York: Academic Press, 1965.
- Adelson, L. "Slaughter of the Innocents: A Study of Forty-Six Homicides in Which the Victims Were Children." *New England Journal of Medicine*, 1961, 264, 1345-1349.
- Adelson, L. "The Battering Child." *Journal of the American Medical Association*, 1972, 222, 159-161.
- Adler, A. *The Practice and Theory of Individual Psychology*. (P. Radin, Trans.) New York: Harcourt Brace Jovanovich, 1927.
- Adler, F. *Sisters in Crime*. New York: McGraw-Hill, 1975.
- Ahuja, R. *Female Offenders in India*. Delhi: Meenakshi Prakashan, 1969.
- Akiskal, H. S., and McKinney, W. T., Jr. "Psychiatry and Pseudopsychiatry." *Archives of General Psychiatry*, 1973, 28, 367-373.
- Alfonso-Deflorida, F., and Delgado, J. M. R. "Lasting Behavioral and EEG Changes in Cats Induced by Prolonged Stimulation of Amygdala." *American Journal of Physiology*, 1958, 193, 223-229.
- Allen, R. P., Safer, D., and Covi, L. "Effects of Psychostimulants on Aggression." *Journal of Nervous and Mental Disease*, 1975, 160, 138-145.
- Alpers, B. J. "Relation of the Hypothalamus to Disorders of Personality: Report of a Case." *Archives of Neurology and Psychiatry*, 1937, 38, 291-303.
- American Law Institute. *Model Penal Code*. Philadelphia: American Law Institute, 1962.
- American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. (3rd ed.) Washington, D.C.: American Psychiatric Association, 1968.
- American Psychiatric Association. *Clinical Aspects of the Violent Individual*. Task Force Report No. 8. Washington, D.C.: American Psychiatric Association, 1974.
- Amir, M. *Patterns in Forcible Rape*. Chicago: University of Chicago Press, 1971.
- Anand, B. K., and Dua, S. "Stimulation of Limbic System of Brain in Waking Animals." *Science*, 1955, 122, 1139.
- Andrus, B. C. *The Infamous of Nuremberg*. London: Frewin, 1969.
- Andy, O. In G. J. Annas and L. H. Glantz, "Psychosurgery: The Law's Response." *Boston University Law Review*, 1973, 54, 249-267.

- Antilla, I. *Kriminologinen Tutkimuslaitos*. Helsinki: 1968.
- Archer, D., and Gartner, R. "The Myth of the Violent Veteran." *Psychology Today*, Dec. 1976a, pp. 94-96, 110-111.
- Archer, D., and Gartner, R. "Violent Acts and Violent Times: A Comparative Approach to Postwar Homicide Rates." *American Sociological Review*, 1976b, 41, 937-963.
- Archer, D., and Gartner, R. "Homicide in 110 Nations: The Development of the Comparative Crime Data File." *International Annals of Criminology*, in press.
- Archer, D., Gartner, R., Akert, R., and Lockwood, T. "Cities and Homicide: A New Look at an Old Paradox." In R. F. Tomasson (Ed.), *Comparative Studies in Sociology*. Vol. 1. Greenwich, Conn.: JAI Press, in press.
- Ardrey, R. *The Territorial Imperative*. New York: Atheneum, 1967.
- Arendt, H. *Eichmann in Jerusalem: A Report on the Banality of Evil*. New York: Viking Press, 1963.
- Arieti, S. (Ed.). *American Handbook of Psychiatry*. Vols. 1-3. New York: Basic Books, 1959.
- Arvin, N. *Herman Melville*. New York: Viking Press, 1957.
- Asch, S. *Social Psychology*. Englewood Cliffs, N.J.: Prentice-Hall, 1952.
- Assael, M., and Kohn Raz, R. "Developmental Analysis of EEG Abnormalities in Juvenile Delinquents." *Diseases of the Nervous System*, 1967, 28, 49-54.
- Asuni, T. "Homicide in Western Nigeria." *British Journal of Psychiatry*, 1969, 115, 1105-1113.
- "An Attack on Vandalism." *American School and University*, June 1973, 43-44.
- Azcarate, D. "Minor Tranquilizers in the Treatment of Aggression." *Journal of Nervous and Mental Disease*, 1975, 160, 100-107.
- Azrin, N. H. "Pain and Aggression." *Psychology Today*, 1967, 1, 27-33.
- Azrin, N. H. "Punishment of Elicited Aggression." *Journal of the Experimental Analysis of Behavior*, 1970, 14, 7-10.
- Azrin, N. H., and Hutchinson, R. R. "Conditioning of the Aggressive Behavior of Pigeons by a Fixed-Interval Schedule of Reinforcement." *Journal of the Experimental Analysis of Behavior*, 1967, 10, 395-402.
- Azrin, N. H., Hutchinson, R. R., and Hake, D. F. "Pain-Induced Fighting in the Squirrel Monkey." *Journal of the Experimental Analysis of Behavior*, 1963, 6, 620.

- Bach-y-Rita, G., Lion, J. R., Climent, C. E., and Ervin, F. R. "Episodic Dyscontrol: A Study of 130 Violent Patients." *American Journal of Psychiatry*, 1971, 127, 1473-1478.
- Bach-y-Rita, G., Lion, J. R., and Ervin, F. R. "Pathological Intoxication: Clinical and Electroencephalographic Studies." *American Journal of Psychiatry*, 1970, 127, 698-703.
- Baenninger, R., and Grossman, J. C. "Some Effects of Punishment on Pain-Elicited Aggression." *Journal of the Experimental Analysis of Behavior*, 1969, 12, 1017-1022.
- Bailey, P. "The Great Psychiatric Revolution." *American Journal of Psychiatry*, 1956, 113, 387-406.
- Baker, D., Telfer, M. A., Richardson, C. E., and Clark, G. R. "Chromosome Errors in Men with Antisocial Behavior." *Journal of the American Medical Association*, 1970, 214, 869-878.
- Balasubramaniam, V., Ramanujam, P. B., Kanaka, T. S., and Ramamurthi, B. "Stereotaxic Surgery for Behavior Disorders." In E. Hitchcock, L. Laitinen, and K. Vaernet (Eds.), *Psychosurgery*. Springfield, Ill.: Thomas, 1972.
- Ball-Rokeach, S. J. "Values and Violence: A Test of the Subculture of Violence Thesis." *American Sociological Review*, 1973, 38 (6), 736-749.
- Bancroft, J. *Deviant Sexual Behavior: Modification and Assessment*. Oxford, England: Clarendon Press, 1974.
- Bandura, A. "A Relationship of Family Patterns to Child Behavior Disorders." Progress Report, Project M-1734, U.S. Public Health Service. Stanford, Calif.: Stanford University, 1960.
- Bandura, A. "Social Learning Through Imitation." In M. R. Jones (Ed.), *Nebraska Symposium on Motivation*. Lincoln: University of Nebraska Press, 1962.
- Bandura, A. "Influence of Models' Reinforcement Contingencies on the Acquisition of Imitative Responses." *Journal of Personality and Social Psychology*, 1965, 1, 589-595.
- Bandura, A. *Principles of Behavior Modification*. New York: Holt, Rinehart and Winston, 1969.
- Bandura, A. "Psychotherapy Based upon Modeling Principles." In A. E. Bergin and S. L. Garfield (Eds.), *Handbook of Psychotherapy and Behavior Change*. New York: Wiley, 1971a.
- Bandura, A. *Social Learning Theory*. New York: General Learning Press, 1971b.
- Bandura, A. "Vicarious and Self-Reinforcement Processes." In R. Glaser (Ed.), *The Nature of Reinforcement*. New York: Academic Press, 1971c.
- Bandura, A. *Aggression: A Social Learning Analysis*. Englewood Cliffs, N.J.: Prentice-Hall, 1973.

- Bandura, A., Grusec, J. E., and Menlove, F. L. "Observational Learning as a Function of Symbolization and Incentive Set." *Child Development*, 1966, 37, 499-506.
- Bandura, A., and Mischel, W. "Modification of Self-Imposed Delay of Reward Through Exposure to Live and Symbolic Models." *Journal of Personality and Social Psychology*, 1965, 2, 698-705.
- Bandura, A., Ross, D., and Ross, S. A. "Transmission of Aggression Through Aggressive Models." *Journal of Abnormal and Social Psychology*, 1961, 63, 575-582.
- Bandura, A., Ross, D., and Ross, S. A. "Imitation of Film-Mediated Aggressive Models." *Journal of Abnormal and Social Psychology*, 1963a, 66, 3-11.
- Bandura, A., Ross, D., and Ross, S. A. "Vicarious Reinforcement and Imitative Learning." *Journal of Abnormal and Social Psychology*, 1963b, 67, 601-607.
- Bandura, A., and Walters, R. H. *Adolescent Aggression*. New York: Ronald Press, 1959.
- Bandura, A., and Walters, R. H. *Social Learning and Personality Development*. New York: Holt, Rinehart and Winston, 1963.
- Bard, M. "Family Intervention Police Teams as a Community Mental Health Resource." *Journal of Criminal Law, Criminology, and Police Science*, 1969, 60, 247-250.
- Bard, M., and Berkowitz, B. "Family Disturbance as a Police Function." In S. Cohn (Ed.), *Law Enforcement, Science and Technology II*. Chicago: I.I.T. Research Institute, 1969.
- Bard, M., and Zacher, J. "The Prevention of Family Violence: Dilemmas of Community Intervention." *Journal of Marriage and the Family*, 1971, 33, 677-682.
- Bard, P., and Mountcastle, V. B. "Some Forebrain Mechanisms Involved in Expression of Rage with Special Reference to Suppression of Angry Behavior." *Proceedings of the Association for Research in Nervous and Mental Disease*, 1948, 27, 362-404.
- Bardwick, J. "The Sex Hormones, the Central Nervous System and Affect Variability in Humans." In V. Franks and V. Burtle (Eds.), *Women in Therapy*. New York: Brunner/Mazel, 1974.
- Barlow, D. H. "The Treatment of Sexual Deviation: Toward a Comprehensive Behavioral Approach." In K. S. Calhoun, H. E. Adams, and K. M. Mitchell (Eds.), *Innovative Treatment Methods in Psychopathology*. New York: Wiley, 1974.
- Barlow, D. H., and Abel, G. G. "Sexual Deviation." In W. Craig-

- head, W. Kazdin, and M. Mahoney (Eds.), *Behavior Modification*. Boston: Houghton Mifflin, 1976.
- Baron, R. A. "Aggression as a Function of Magnitude of Victim's Pain Cues, Level of Prior Anger Arousal, and Aggressor-Victim Similarity." *Journal of Personality and Social Psychology*, 1971a, 18, 48-54.
- Baron, R. A. "Magnitude of Victim's Pain Cues and Level of Prior Anger Arousal as Determinants of Adult Aggressive Behavior." *Journal of Personality and Social Psychology*, 1971b, 17, 236-243.
- Baron, R. A. "Aggression as a Function of Ambient Temperature and Prior Anger Arousal." *Journal of Personality and Social Psychology*, 1972, 21, 183-189.
- Baron, R. A. "The Aggression-Inhibiting Influence of Heightened Sexual Arousal." *Journal of Personality and Social Psychology*, 1974a, 30, 318-322.
- Baron, R. A. "Sexual Arousal and Physical Aggression: The Inhibiting Influence of 'Cheesecake' and Nudes." *Bulletin of the Psychonomic Society*, 1974b, 3, 337-339.
- Baron, R. A. *Human Aggression*. New York: Plenum Press, 1977.
- Baron, R. A., and Bell, P. A. "Effects of Heightened Sexual Arousal on Physical Aggression." *Proceedings of the 81st Annual Convention of the American Psychological Association*, 1973, 171-172.
- Baron, R. A., and Bell, P. A. "Aggression and Heat: Mediating Effects of Prior Provocation and Exposure to an Aggressive Model." *Journal of Personality and Social Psychology*, 1975, 31, 825-832.
- Baron, R. A., and Bell, P. A. "Sexual Arousal and Aggression by Males: Effects of Type of Erotic Stimuli and Prior Provocation." *Journal of Personality and Social Psychology*, 1977, 35, 79-87.
- Barter, J. T., and Reite, M. "Crime and LSD: The Insanity Plea." *American Journal of Psychiatry*, 1969, 126, 531-537.
- Bateson, G. *The Naven*. Stanford, Calif.: Stanford University Press, 1936.
- Bateson, G. "The Frustration-Aggression Hypothesis and Culture." *Psychological Review*, 1941, 48, 350-355.
- Bayh, B. *Challenge for the Third Century: Education in a Safe Environment*. Final Report on the Nature and Prevention of School Violence and Vandalism. Washington, D.C.: U.S. Government Printing Office, 1977.

- Bem, S. L. "The Measurement of Psychological Androgyny." *Journal of Consulting and Clinical Psychology*, 1974, 42, 155-162.
- Bem, S. L., and Bem, D. J. "Case Study of a Nonconscious Ideology: Training the Woman to Know Her Place." In D. J. Bem, *Beliefs, Attitudes, and Human Affairs*. Monterey, Calif.: Brooks/Cole, 1970.
- Bender, B. "Self-Chosen Victims: Scapegoating Behavior Sequential to Battering." *Child Welfare*, 1976, 17, 417-422.
- Benedek, T., and Rubenstein, B. B. "The Sexual Cycle in Women: The Relation Between Ovarian Function and Psychodynamic Processes." *Psychosomatic Medicine Monographs*, 1942, 3 (1 and 2).
- Bennett, R. M., Buss, A. H., and Carpenter, J. A. "Alcohol and Human Physical Aggression." *Quarterly Journal of Studies on Alcohol*, 1969, 30, 870-876.
- Berger, M. "The Survivor Syndrome: A Problem of Nosology and Treatment." *American Journal of Psychotherapy*, 1977, 31, 238-251.
- Berkowitz, L. "Repeated Frustrations and Expectations in Hostility Arousal." *Journal of Abnormal and Social Psychology*, 1960, 60, 422-429.
- Berkowitz, L. *Aggression: A Social-Psychological Analysis*. New York: McGraw-Hill, 1962.
- Berkowitz, L. "The Concept of Aggressive Drive: Some Additional Considerations." In L. Berkowitz (Ed.), *Advances in Experimental Social Psychology*. Vol. 2. New York: Academic Press, 1965a.
- Berkowitz, L. "Some Aspects of Observed Aggression." *Journal of Personality and Social Psychology*, 1965b, 2, 359-369.
- Berkowitz, L. "Aggressive Humor as a Stimulus to Aggressive Responses." *Journal of Personality and Social Psychology*, 1970a, 16, 710-717.
- Berkowitz, L. "The Contagion of Violence: An S-R Mediation Analysis of Some Effects of Observed Aggression." In W. J. Arnold and M. M. Page (Eds.), *Nebraska Symposium on Motivation*. Lincoln: University of Nebraska Press, 1970b.
- Berkowitz, L. "Some Determinants of Impulsive Aggression: The Role of Mediated Associations with Reinforcements for Aggression." *Psychological Review*, 1974, 81, 165-176.
- Berkowitz, L., and Le Page, A. "Weapons as Aggression-Eliciting Stimuli." *Journal of Personality and Social Psychology*, 1967, 7, 202-207.



- Berkowitz, L., and Rawlings, E. "Effects of Film Violence on Inhibitions Against Subsequent Aggression." *Journal of Abnormal and Social Psychology*, 1963, 66, 405-412.
- Berliner, B. "Role of Object Relations in Moral Masochism." *Psychoanalytic Quarterly*, 1958, 27, 38-56.
- Bettelheim, B. "Individual and Mass Behavior in Extreme Situations." *Journal of Abnormal and Social Psychology*, 1943, 38, 417-452.
- Bettelheim, B. "Violence: A Neglected Mode Of Behavior." *Annals of the American Academy of Political and Social Science*, 1966, 364, 50-59.
- Bibring, E. "The Development and Problems of the Theory of the Instincts." *International Journal of Psychoanalysis*, 1941, 21, 102-131.
- Bibring, G. L., Dwyer, T. F., Huntington, D. S., and Valenstein, A. F. "A Study of the Psychological Processes in Pregnancy and of the Earliest Mother-Child Relationship. 1: Some Propositions and Comments." *Psychoanalytic Study of the Child*, 1961, 16, 9-24.
- Blackman, N., Weiss, J. M. A., and Lamberti, J. W. "The Sudden Murderer." *Archives of General Psychiatry*, 1963, 8, 289-294.
- Blanck, G., and Blanck, R. *Ego Psychology: Theory and Practice*. New York: Columbia University Press, 1974.
- Block, H. A., and Geis, G. *Man, Crime, and Society*. New York: Random House, 1962.
- Blumberg, M. "Treatment of the Abused Child and the Child Abuser." *American Journal of Psychotherapy*, 1977, 31, 204-215.
- Blumenthal, M. D., Kahn, R. L., Andrews, F. M., and Head, K. B. *Justifying Violence*. Ann Arbor: University of Michigan Press, 1972.
- Blumer, D., and Migeon, C. "Hormone and Hormonal Agents in the Treatment of Aggression." *Journal of Nervous and Mental Disease*, 1975, 160, 127-137.
- Blurton-Jones, N. G. *Ethological Studies of Child Behaviour*. London: Cambridge University Press, 1972.
- Bohannon, P. (Ed.). *African Homicide and Suicide*. Princeton, N.J.: Princeton University Press, 1960.
- Bonger, W. A. *Criminality and Economic Conditions*. (H. P. Horton, Trans.) Boston: Little, Brown, 1916.
- Bonnie, R. J. *Trends in Criminal Justice Reform in Diagnosis and Debate*. New York: Insight Communications, 1977.

- Borus, J. F. "The Reentry Transition of the Vietnam Veteran." *Armed Forces and Society*, 1975, 2, 97-114.
- Bottome, P. *Alfred Adler*. New York: Vanguard Press, 1957.
- Boughman, F. A., and Mann, J. D. "Ascertainment of Seven XYY Males in Private Neurology Practice." *Journal of the American Medical Association*, 1972, 222, 446-448.
- Bowles, S. "Unequal Education and the Reproduction of the Social Division of Labor." In M. Carnoy (Ed.), *Schooling in a Corporate Society: The Political Economy of Education in America and the Alternatives Before Us*. New York: McKay, 1972.
- Bowles, S. "Contradictions in U.S. Higher Education." In J. Weaver (Ed.), *Political Economy: Radical and Orthodox Views on Critical Issues*. Boston: Allyn & Bacon, 1973.
- Boyatzis, R. E. "The Effect of Alcohol Consumption on the Aggressive Behavior of Men." *Quarterly Journal of Studies on Alcohol*, 1974, 35, 959-972.
- Brancale, R., Vuocolo, A., and Prendergast, Jr., W. E. "The New Jersey Program for Sex Offenders." In H. L. P. Resnik and M. Wolfgang (Eds.), *Sexual Behavior: Social, Clinical and Legal Aspects*. Boston: Little, Brown, 1972.
- Branham, V. C., and Kutash, S. B. *Encyclopedia of Criminology*. New York: Philosophical Library, 1939.
- Brecher, E. M., and Editors of *Consumer Reports*. *Licit and Illicit Drugs: The Consumers Union Report on Narcotics, Stimulants, Depressants, Inhalants, Hallucinogens, and Marijuana—Including Caffeine, Nicotine, and Alcohol*. Boston: Little, Brown, 1972.
- Breggin, P. R. "Psychosurgery for the Control of Violence." In W. S. Fields and W. H. Sweet (Eds.), *Neural Bases of Violence and Aggression*. St. Louis: Green, 1975.
- Brenner, C. "The Masochistic Character." *Journal of the American Psychoanalytic Association*, 1959, 7, 197-226.
- Brenner, C. *An Elementary Textbook of Psychoanalysis*. New York: International Universities Press, 1973.
- Brewer, C., and Perrett, L. "Brain Damage Due to Alcohol Consumption: An Airencephalographic, Psychometric, and Electroencephalographic Study." *British Journal of Addiction*, 1971, 66, 170-182.
- Brock, T. C., and Buss, A. H. "Dissonance, Aggression, and Evaluation of Pain." *Journal of Abnormal and Social Psychology*, 1962, 65, 197-202.
- Brock, T. C., and Buss, A. H. "Effects of Justification for Ag-

- gression and Communication with the Victim on Postaggression Dissonance." *Journal of Abnormal and Social Psychology*, 1964, 68, 403-412.
- Bromberg, W. *The Mold of Murder*. New York: Grune & Stratton, 1961.
- Bronfenbrenner, U. "Socialization and Social Class Through Time and Space." In E. E. Maccoby, T. M. Newcomb, and E. L. Hartley (Eds.), *Readings in Social Psychology*. (3rd ed.) New York: Holt, Rinehart and Winston, 1958.
- Broverman, D. M., Klaiber, E. L., Kobayashi, Y., and Vogel, W. "Roles of Activation and Inhibition in Sex Differences in Cognitive Abilities." *Psychology Review*, 1968, 75, 23-50.
- Broverman, F., Broverman, D. M., Clarkson, F. E., Rosenkranz, P. S., and Vogel, S. R. "Sex Role Stereotypes and Clinical Judgment of Mental Health." *Journal of Consulting and Clinical Psychology*, 1970, 34, 1-7.
- Brown, B. A. "Crime Against Women Alone." Memphis, Tenn.: Memphis Police Department, 1974. (Mimeograph.)
- Brown, B. S., Wienckowski, L. A., and Bivens, L. W. In G. J. Annas and L. H. Glantz, "Psychosurgery: The Law's Response." *Boston University Law Review*, 1973, 54, 249-267.
- Brown, J. L. *The Evolution of Behavior*. New York: Norton, 1975.
- Browning, C. "Handguns and Homicide." *Journal of the American Medical Association*, 1976, 236, 2198-2200.
- Brownmiller, S. *Against Our Will: Men, Women and Rape*. New York: Simon & Schuster, 1975.
- Bruch, H. "Mass Murder: The Wagner Case." *American Journal of Psychiatry*, 1967, 124, 693-698.
- Buckhout, R. "Eyewitness Testimony." *Scientific American*, 1974, 231, 23-31.
- Buechner, H. K. "Territorial Behavior in Uganda Kob." *Science*, 1961, 133, 698-699.
- Buechner, H. K. "Territoriality as a Behavioral Adaptation to Environment in Uganda Kob." *Proceedings of the 16th International Congress of Zoology*, 1963, 3, 59-63.
- Buechner, H. K., Leuthold, W., and Roth, H. D. "Lek Territorial Occupancy in Male Uganda Kob Antelope." *East African Wildlife Journal*, in press.
- Buechner, H. K., and Schloeth, R. "Ceremonial Mating Behavior in Uganda Kob (*Kobus kob thomasi* Neumann)." *Zeitschrift für Tierpsychologie*, 1965, 22, 209-225.
- Burgess, A., and Holmstrom, L. "Coping Behavior of the Rape

- Victim." *American Journal of Psychiatry*, 1976, 133 (4), 413-417.
- Burkhart, K. *Women in Prison*. New York: Doubleday, 1973.
- Burnstein, and Worchel, P. "Arbitrariness of Frustration and Its Consequences for Aggression in a Political Situation." *Journal of Personality*, 1962, 30, 528-540.
- Burt, R. "Of Mad Dogs and Scientists: The Perils of the Criminal-Insane." *University of Pennsylvania Law Review*, 1974, 123, 258-283.
- Buss, A. H. *The Psychology of Aggression*. New York: Wiley, 1961.
- Buss, A. H. "Instrumentality of Aggression, Feedback and Frustration and Determinants of Physical Aggression." *Journal of Personality and Social Psychology*, 1966, 3, 153-162.
- Bybee, R. "Dimensions and Dynamics of Classroom Violence." Paper presented at Symposium on Violence at Home and at School, American Association for the Advancement of Science, February 25, 1977.
- Bychowski, G. "Permanent Character Changes as an After-Effect of Persecution." In H. Krystal (Ed.), *Massive Psychic Trauma*. New York: International Universities Press, 1968.
- Calhoun, J. B. "Population Density and Social Pathology." *Scientific American*, 1962, 206, 139-148.
- Calvin, J. A. V., and MacDonald, J. H. "Psychiatric Study of a Mass Murder." *American Journal of Psychiatry*, 1959, 115, 1057-1061.
- Campbell, J. S., Sahid, J. R., and Stang, D. P. *Law and Order Reconsidered*. A staff report to the National Commission on the Causes and Prevention of Violence. New York: Praeger, 1969.
- Caplan, N. S. "The New Ghetto Man: A Review of Recent Empirical Studies." *Journal of Social Issues*, 1970, 26, 59-73.
- Carey, J. T., and Mandel, J. "A San Francisco Bay Area 'Speed' Scene." *Journal of Health and Social Behavior*, 1968, 9, 164-174.
- Carney, F. "Some Recurring Therapeutic Issues in Group Psychotherapy with Criminal Patients." *American Journal of Psychotherapy*, 1972, 26, 34-41.
- Cartwright, D., and Harary, F. "Structural Balance: A Generalization of Heider's Theory." *Psychological Review*, 1956, 63, 277-294.
- Casparis, C. *Zur Unrast der Jugend: Eine sozialpsychologische Untersuchung der Beziehungen zwischen Erwachsenen und*

- Jugendlichen in Familie, Bildung, und Beruf*. Freuenfeld-Stuttgart: Huber, 1975.
- Chagnon, N. *Yanomamö: The Fierce People*. New York: Holt, Rinehart and Winston, 1968.
- Chambers v. Florida*. 309 U.S. 227 (1940).
- Chandler, D. B. "Toward a Classification of Violence." *Sociological Symposium*, 1973, 9, 69-83.
- Cheek, F. E., and Holstein, C. M. "Lysergic Acid Diethylamide Tartrate (LSD-25) Dosage Levels, Group Differences, and Social Interaction." *Journal of Nervous and Mental Disease*, 1971, 153, 133-147.
- Chein, I., Gerard, D. L., Lee, R. S., and Rosenfeld, E. *The Road to H: Narcotics, Delinquency, and Social Policy*. New York: Basic Books, 1964.
- Chernoff, P., and Schaffer, W. "Defending the Mentally Ill: Ethical Quicksand." *American Criminal Law Review*, 1972, 10, 505-524.
- Chesler, P. *Women and Madness*. New York: Doubleday, 1972.
- Chodoff, P. "The German Concentration Camp as a Psychological Stress." *Archives of Psychiatry*, 1970, 22, 78-87.
- Chorover, S. L. "Big Brother and Psychotechnology." *Psychology Today*, Oct. 1973, pp. 43-54.
- Chorover, S. L. "Big Brother and Psychotechnology: The Pacification of the Brain." *Psychology Today*, May 1974, pp. 59-69.
- Claster, D. S. "Comparison of Risk Perception Between Delinquents and Nondelinquents." *Journal of Criminal Law, Criminology, and Police Science*, 1967, 58, 80-86.
- Cleaver, E. *Soul on Ice*. New York: McGraw-Hill, 1967.
- Cleckley, H. *The Mask of Sanity*. (4th ed.) St. Louis: Mosby, 1964.
- Cloward, R. A., and Ohlin, L. E. *Delinquency and Opportunity*. New York: Free Press, 1960.
- Coghill, G. E. *Anatomy and the Problem of Behavior*. Cambridge, England: Cambridge University Press, 1929.
- Cohen, A. K. *Delinquent Boys: The Culture of Gangs*. New York: Free Press, 1955.
- Cohen, A. K., and Short, J. F., Jr. "Research in Delinquent Subcultures." *Journal of Social Issues*, 1958, 14, 20-37.
- Cohen, A. R. "Social Norms, Arbitrariness of Frustration, and Status of the Agent of Frustration in the Frustration-Aggression Hypothesis." *Journal of Abnormal and Social Psychology*, 1955, 51, 222-226.
- Cohen, S. "Lysergic Acid Diethylamide: Side Effects and Com-

- plications." *Journal of Nervous and Mental Disease*, 1960, 130, 30-40.
- Cohen, S., and Ditman, K. S. "Prolonged Adverse Reactions to Lysergic Acid Diethylamide." *Archives of General Psychiatry*, 1963, 8, 475-480.
- Cole, A. B. "Children of a Vacuum." *Pacific Spectator*, 1950, 4, 153-159.
- Cole, K., Fisher, G., and Cole, S. "Women Who Kill." *Archives of General Psychiatry*, 1968, 19, 1-8.
- Coleman, J. S. *The Adolescent Society*. New York: Free Press, 1961.
- Coleman, J. S. *Introduction to Mathematical Sociology*. London: Collier-Macmillan, 1964.
- Collins, R. *Conflict Sociology: Toward an Explanatory Science*. New York: Academic Press, 1975.
- Connell, P. H. *Amphetamine Psychosis*. London: Oxford University Press, 1958.
- Corder, B. F., Ball, B. C., Halzlip, T. M., Rollins, R., and Beaumont, R. "Adolescent Parricide: A Comparison with Other Adolescent Murder." *American Journal of Psychiatry*, 1976, 133, 957-961.
- Cormier, B. M. "Psychodynamics of Homicide Committed in a Marital Relationship." *Corrective Psychiatry and Journal of Social Therapy*, 1962, 8, 187-194.
- Coser, L. A. *The Functions of Social Conflict*. New York: Free Press, 1956.
- Coser, L. A. *Continuities in the Study of Social Conflict*. New York: Free Press, 1967.
- Couch, C. "Collective Behavior: An Examination of Stereotypes." *Social Problems*, 1968, 15, 310-321.
- Couzens, M. *Reflections on the Study of Violence*. Washington, D.C.: Brookings Institution, 1971.
- Crawford, T., and Naditch, M. "Relative Deprivation, Powerlessness, and Militancy: The Psychology of Social Protest." *Psychiatry*, 1970, 33, 208-223.
- Crook, J. H. "The Socio-Ecology of Primates." In J. H. Crook (Ed.), *Social Behaviour in Birds and Mammals*. New York: Academic Press, 1970.
- Crook, J. H. "The Nature and Function of Territorial Aggression." In A. Montagu (Ed.), *Man and Aggression*. (2nd ed.) London: Oxford University Press, 1973.
- Currie, S., Heathfield, K. W. G., Henson, R. A., and Scott, D. F. "Clinical Course and Prognosis of Temporal Lobe Epilepsy: A Survey of 666 Patients." *Brain*, 1971, 94, 173-190.

- Curtis, L. A. *Criminal Violence*. Lexington, Mass.: Heath, 1974.
- Cushing, H. *The Pituitary Body and Hypothalamus*. Springfield, Ill.: Thomas, 1929.
- Dalton, K. *The Premenstrual Syndrome*. Springfield, Ill.: Thomas, 1964.
- Daniels, D. N., Gilula, M. F., and Ochberg, F. M. (Eds.). *Violence and the Struggle for Existence*. Boston: Little, Brown, 1970.
- Darrow, C. *Crime and Its Causes*. New York: Crowell, 1922.
- Darwin, C. *The Descent of Man and Selection in Relation to Sex* [1871]. London: Encyclopaedia Britannica, 1952.
- David, R. L. "Cross-Cultural Problems in the Analysis of Anti-social Student Behavior." Paper presented at International Sociological Association's Conference of the Research Committee for the Sociology of Deviance and Social Control, Hiroshima, Japan, September 1-3, 1976a.
- David, R. L. "Vandals, Rowdies, and Mischievous Students." Paper presented at 25th annual Regional Research Institute, District of Columbia Sociological Society, Washington, D.C., May 15, 1976b.
- Davidson, H. "That Other Helping Profession." *American Journal of Psychiatry*, 1965, 121, 691-692.
- Davies, J. C. "The J-Curve of Rising and Declining Satisfaction as a Cause of Some Great Revolutions and a Contained Rebellion." In H. D. Graham and T. R. Gurr (Eds.), *Violence in America: Historical and Comparative Perspectives*. Vol. 2. Washington, D.C.: U.S. Government Printing Office, 1969.
- Davis, D. R. "Psychomotor Effects of Analeptics and Their Relation to 'Fatigue' Phenomena in Air-Crew." *British Medical Bulletin*, 1947, 5, 43-45.
- Davitz, J. R. "The Effects of Previous Training on Postfrustration Behavior." *Journal of Abnormal and Social Psychology*, 1952, 47, 309-315.
- De Bault, L., Johnston, E., and Loeffelnolz, P. "Incidence of XYY and XXY Individuals in a Security Hospital Population." *Diseases of the Nervous System*, 1972, 33, 590-593.
- Deiker, T. E. "WAIS Characteristics of Indicted Male Murderers." *Psychological Reports*, 1973, 32, 1066.
- DeLong, J. V. "The Drugs and Their Effects." In P. M. Wald and P. B. Hutt (Eds.), *Dealing with Drug Abuse: A Report to the Ford Foundation*. New York: Praeger, 1972.
- Demolina, A. F., and Hunsperger, R. W. "Central Representation of Affective Reactions in Forebrain and Brain Stem." *Journal of Physiology*, 1959, 145, 251-265.

- deRham, E. *How Could She Do It?* New York: Potter, 1969.
- Dershovitz, A. M. "Dangerousness as a Criterion for Confinement." *Bulletin of the American Academy of Psychiatry and Law—Special Issue*, 1973, 2, 172-179.
- Deutsch, H. *The Psychology of Women: A Psychoanalytic Interpretation*. Vol. 1. New York: Grune & Stratton, 1944.
- Deutsch, M. *Minority Group and Class Status as Related to Social and Personality Factors in Scholastic Achievement*. Society for Applied Anthropology Monograph 2. New York: Cornell University, 1960.
- Diamond, B., and Louisell, D. "The Psychiatrist as an Expert Witness: Some Ruminations and Speculations." *Michigan Law Review*, 1965, 63, 1335-1340.
- Diamond, M. "On Democracy." *The Public Interest*, 1975, 41, 39-55.
- di Furia, G. "On the Treatment and Disposition of Sexual Offenders." *Northwest Medicine*, 1966, 65, 629-632.
- di Furia, G., and Mees, H. L. "Intensive Group Psychotherapy with Sexual Offenders." Paper presented at 3rd International Congress of Group Psychotherapy, Milan-Stresa, Italy, 1963.
- di Furia, G., and Mees, H. L. "Legal and Psychiatric Problems in the Care and Treatment of Sexual Offenders (A National Survey)." *American Journal of Psychiatry*, 1964, 120, 980-985.
- Dillion, S. V., and Grout, J. A. "Schools and Alienation." *Elementary School Journal*, 1976, 76, 481-490.
- Ditrichs, R., Simon, S., and Greene, B. "Effect of Vicarious Scheduling on the Verbal Conditioning of Hostility in Children." *Journal of Personality and Social Psychology*, 1967, 6, 71-78.
- Dixon, B. "The Student and the Subculture: An Alternative View." Unpublished manuscript, 1977.
- Dixon, T., and Blondis, R. "Cross Examination of Psychiatric Witnesses in Civil Commitment Proceedings." *Mental Disability Law Reports*, 1976, 1, 164-171.
- Dollard, J., Miller, N., Doob, L., Mowrer, O. H., and Sears, R. R. *Frustration and Aggression*. New Haven, Conn.: Yale University Press, 1939.
- Dongier, S. "Statistical Study of Clinical and Electroencephalographic Manifestations of 536 Psychotic Episodes Occurring in 516 Epileptics Between Clinical Seizures." *Epilepsia*, 1959, 1, 117-142.
- Donnerstein, E., Donnerstein, M., and Evans, R. "Erotic Stimuli and Aggression: Facilitation or Inhibition." *Journal of Personality and Social Psychology*, 1975, 32, 237-244.



- Doob, L., and Sears, R. "Factors Determining Substitute Behavior and the Overt Expression of Aggression." *Journal of Abnormal and Social Psychology*, 1939, 34, 293-313.
- Dorland's Illustrated Medical Dictionary*. (25th ed.) Philadelphia: Saunders, 1974.
- Drabman, R. S., and Thomas, M. H. "Does Media Violence Increase Children's Tolerance of Real-Life Aggression?" *Developmental Psychology*, 1974, 10, 418-421.
- Drewe, E. A., Ettlinger, G., Milner, A. D., and Passingham, R. E. "A Comparative Review of the Results of Neuropsychological Research on Man and Monkey." *Cortex*, 1970, 6, 129-163.
- Drope v. Missouri*. 420 U.S. 162 (1975).
- Dunbar, D. *Blood in the Parlor*. New York: A. S. Barnes, 1964.
- Duncan, J. W., and Duncan, G. M. "Murder in the Family: A Study of Some Homicidal Adolescents." *American Journal of Psychiatry*, 1971, 127, 1498-1502.
- Durham v. United States*. 214 F.2nd 909 (D.C. Cir. 1954).
- Durkheim, E. *The Rules of Sociological Method* [1894]. New York: Free Press, 1964.
- Edel, L. *The Life of Henry James*. Vol. 1: *The Untried Years*. Philadelphia: Lippincott, 1953.
- Edwards, N. L. "Aggressive Expression Under Threat of Retaliation." Unpublished doctoral dissertation, University of Iowa, 1967.
- Egger, E. *Schools in Switzerland*. Basel: Beltz, 1969.
- Egger, M. D., and Flynn, J. P. "Effects of Electrical Stimulation of the Amygdala on Hypothalamically Elicited Attack Behavior in Cats." *Journal of Neurophysiology*, 1963, 26, 705-720.
- Eibl-Eibesfeldt, I. *Ethology: The Biology of Behavior*. New York: Holt, Rinehart and Winston, 1970.
- Eisenberg, J. F. "The Social Organization of Mammals." In *Handbuch der Zoologie*. Berlin: de Gruyter, 1966.
- Eisenbud, R. J. "Masochism Revisited." *Psychoanalytic Review*, 1967, 54, 561-582.
- Ellingson, J. "Incidence of EEG Abnormality Among Patients with Mental Disorders of Non-Organic Origin." *American Journal of Psychiatry*, 1954, 111, 263-282.
- Ellinwood, E. H. "Assault and Homicide Associated with Amphetamine Abuse." *American Journal of Psychiatry*, 1971, 127, 1170-1175.
- Endleman, S. (Ed.). *Violence in the Streets*. New York: Quadrangle Books, 1968.

- Engel, J., Driver, M. V., and Falconer, M. A. "Electrophysiological Correlates of Pathology and Surgical Results in Temporal Lobe Epilepsy." *Brain*, 1975, 98, 129-156.
- Erikson, E. *Childhood and Society*. New York: Norton, 1963.
- Erikson, E. "Womanhood and the Inner Space" [1968]. In J. Strouse (Ed.), *Women and Analysis*. New York: Grossman, 1974.
- Erlanger, H. S., and Winsborough, H. H. "The Subculture of Violence Thesis: An Example of a Simultaneous Equation Model in Sociology." *Sociological Methods and Research*, 1976, 5, 231-246.
- Estes, R. D. "Territorial Behavior of the Wildebeest (*Connachaetes taurinus* Burchell, 1823)." *Zeitschrift für Tierpsychologie*, 1969, 26, 284-370.
- Evans, P. "Infanticide." *Proceedings of the Royal Society of Medicine*, 1968, 61, 1296-1298.
- Ewer, R. F. *Ethology of Mammals*. London: Elek, 1968.
- Eysenck, S., and Eysenck, H. "The Personality of Female Prisoners." *British Journal of Psychiatry*, 1973, 122, 693-698.
- Fabing, H. D. "On Going Berserk: A Neurochemical Inquiry." *American Journal of Psychiatry*, 1956, 113, 409-415.
- Fact Sheet—Mentally Ill Offender*. Atascadero, Calif.: Atascadero State Hospital, 1977.
- Factor, M. "A Woman's Psychological Reaction to Attempted Rape." *Psychoanalytic Quarterly*, 1954, 23, 243-244.
- Falconer, M. A. "Reversibility by Temporal-Lobe Resection of the Behavioral Abnormalities of Temporal-Lobe Epilepsy." *New England Journal of Medicine*, 1973, 289, 451-455.
- Falconer, M. A., Hill, D., Meyer, A., and Wilson, J. L. "Clinical, Radiological, and EEG Correlations with Pathological Changes in Temporal Lobe Epilepsy and Their Significance in Surgical Treatment." In M. Baldwin and P. Bailey (Eds.), *Temporal Lobe Epilepsy*. Springfield, Ill.: Thomas, 1958.
- Fararo, T. J. *Mathematical Sociology: An Introduction to Fundamentals*. New York: Wiley, 1973.
- Farber, D. *The Mothers of American Presidents*. New York: New American Library, 1961.
- Faulkner, R. K. "On Respect and Retribution: Toward an Ethnography of Violence." *Sociological Symposium*, 1973, 9, 17-36.
- Fawcett, J. (Ed.). *Dynamics of Violence*. Chicago: American Medical Association, 1971.

- Feagin, J. R. "Social Sources of Support for Violence and Non-Violence in a Negro Ghetto." *Social Problems*, 1968, 15 (4), 432-441.
- Federn, P. *Ego Psychology and the Psychoses*. New York: Basic Books, 1952.
- Fenichel, O. *Problems of Psychoanalytic Technique*. New York: Psychoanalytic Quarterly Press, 1941.
- Fenichel, O. *The Psychoanalytic Theory of Neurosis*. New York: Norton, 1945.
- Feshbach, S. "The Drive-Reducing Function of Fantasy Behavior." *Journal of Abnormal and Social Psychology*, 1955, 50, 3-11.
- Feshbach, S. "The Function of Aggression and the Regulation of Aggressive Drive." *Psychological Review*, 1964, 71, 257-272.
- Feshbach, S. "Aggression." In P. H. Mussen (Ed.), *Carmichael's Manual of Child Psychology*. Vol. 2. (3rd ed.) New York: Wiley, 1970.
- Festinger, L. *A Theory of Cognitive Dissonance*. Stanford, Calif.: Stanford University Press, 1957.
- Feuerlein, W., and Heyse, H. "Die Weite der 3. Hirnkammer bei Alkoholikern." *Archiv für Psychiatrie und Nervenkrankheiten*, 1970, 213, 78-85.
- Finestone, H. "Narcotics and Criminality." In J. A. O'Donnell and J. C. Ball (Eds.), *Narcotic Addiction*. New York: Harper & Row, 1966.
- Fingarette, H. *The Meaning of Criminal Insanity*. Berkeley: University of California Press, 1972.
- Flugel, S. *Man, Morals and Society*. New York: Viking Press, 1961.
- Fontana, V. J. *The Maltreated Child*. Springfield, Ill.: Thomas, 1964.
- Fontana, V. J. *Somewhere a Child Is Crying*. New York: Macmillan, 1976.
- Fort, J. P., Jr. "Heroin Addiction Among Young Men." In J. A. O'Donnell and J. C. Ball (Eds.), *Narcotic Addiction*. New York: Harper & Row, 1966.
- Fox, S. "Physical Disorder, Consciousness, and Criminal Liability." *Columbia Law Review*, 1963, 63, 645-647.
- Frank, J. *Courts on Trial*. Princeton, N.J.: Princeton University Press, 1949.
- Freedman, L. "Profile of an Assassin." *Police*, March-April 1966, 9, 32-38.
- Freeman, L. *Before I Kill More*. New York: Crown, 1955.

- Freud, S. *The Interpretation of Dreams* [1900]. In J. Strachey (Ed.), *The Complete Works of Sigmund Freud*. Vols. 4-5. London: Hogarth Press, 1953.
- Freud, S. *Jokes and Their Relation to the Unconscious* [1905a]. New York: Norton, 1960.
- Freud, S. "Three Essays on the Theory of Sexuality" [1905b]. In J. Strachey (Ed.), *The Complete Works of Sigmund Freud*. Vol. 7. London: Hogarth Press, 1953.
- Freud, S. *Family Romances* [1909]. In *Standard Edition of the Complete Psychological Works of Sigmund Freud*. Vol. 9. London: Hogarth Press, 1959.
- Freud, S. *The History of the Psychoanalytic Movement* [1914]. In J. Strachey (Ed.), *The Complete Works of Sigmund Freud*. Vol. 14. London: Hogarth Press, 1953.
- Freud, S. "Instincts and Their Vicissitudes" [1915a]. In *Standard Edition of the Complete Psychological Works of Sigmund Freud*. Vol. 14. London: Hogarth Press, 1957.
- Freud, S. "Some Character-Types Met With in Psycho-Analytic Work" [1915b]. In *Collected Papers*. (3rd ed.) Vol. 4. New York: Basic Books, 1959.
- Freud, S. *Beyond the Pleasure Principle* [1920]. In *Standard Edition of the Complete Psychological Works of Sigmund Freud*. Vol. 18. London: Hogarth Press, 1961.
- Freud, S. *The Ego and the Id* [1923]. In J. Strachey (Ed.), *The Complete Works of Sigmund Freud*. Vol. 19. London: Hogarth Press, 1953.
- Freud, S. *Economic Problem of Masochism* [1924]. In *Standard Edition of the Complete Psychological Works of Sigmund Freud*. Vol. 19. London: Hogarth Press, 1961.
- Freud, S. "Some Psychical Consequences of the Anatomical Distinction Between the Sexes" [1925]. In J. Strouse (Ed.), *Women and Analysis*. New York: Grossman, 1974.
- Freud, S. *Civilization and Its Discontents* [1930]. In *Standard Edition of the Complete Psychological Works of Sigmund Freud*. Vol. 21. London: Hogarth Press, 1961.
- Freud, S. "Female Sexuality" [1931]. In J. Strouse (Ed.), *Women and Analysis*. New York: Grossman, 1974.
- Freud, S. "Why War" [1932]? In J. Strachey (Ed.), *The Complete Works of Sigmund Freud*. Vol. 22. London: Hogarth Press, 1953.
- Freud, S. "Femininity" [1933a]. In J. Strouse (Ed.), *Women and Analysis*. New York: Grossman, 1974.
- Freud, S. *New Introductory Lectures on Psycho-Analysis*. New York: Norton, 1933b.

- Freud, S. *An Outline of Psychoanalysis* [1940]. New York: Norton, 1949.
- Friedenberg, E. *The Dignity of Youth and Other Atavisms*. Boston: Beacon Press, 1965.
- Friedrich, L. K., and Stein, A. H. "Aggressive and Prosocial Television Programs and the Natural Behavior of Preschool Children." *Monographs of the Society for Research in Child Development*, 1973, 38 (4).
- Frisbie, L. V., and Dondis, E. H. *Recidivism Among Treated Sex Offenders*. Research Monograph 5. Sacramento: California Department of Mental Hygiene, 1965.
- Fromm, E. *Escape from Freedom*. New York: Holt, Rinehart and Winston, 1941.
- Fromm, E. *The Anatomy of Human Destructiveness*. New York: Holt, Rinehart and Winston, 1973.
- Gager, N., and Schurr, C. *Sexual Assault: Confronting Rape in America*. New York: Grosset & Dunlap, 1976.
- Galenson, E. "Psychology of Women: Panel Reports: (1) Infancy and Early Childhood. (2) Latency and Adolescence." *Journal of the American Psychoanalytic Association*, 1976, 24, 631-645.
- Gamson, W. A., and McEvoy, J. "Police Violence and Its Public Support." In J. F. Short and M. E. Wolfgang (Eds.), *Collective Violence*. Chicago: Aldine, 1972.
- Gans, H. J. *The Urban Villagers*. New York: Free Press, 1962.
- Gardner, R., and Heider, K. G. *Gardens of War*. New York: Random House, 1968.
- Gastaut, H., Morin, G., and Lesèvre, N. "Étude du Comportement des Épileptiques Psychomoteurs dans l'Intervalle de Leurs Crises, les Troubles de l'Activité Globale et de la Sociabilité." *Annales de Médecine et Psychologie*, 1955, 113, 1-27.
- Gastil, R. D. "Homicide and a Regional Culture of Violence." *American Sociological Review*, 1971, 36 (3), 412-427.
- Gault, W. "Some Remarks on Slaughter." *American Journal of Psychiatry*, 1971, 128, 450-454.
- Gayral, L., Millet, G., Moron, P., and Turnin, J. "Crises et Paroxysmes Catathymiques." *Annales Médico-Psychologiques*, 1956, 114, 25-50.
- Gebhard, P. H., Gagnon, J. H., and Pomeroy, W. B. *Sex Offenders: An Analysis of Types*. New York: Harper & Row, 1965.
- Geen, R. G. "Effects of Frustration, Attack, and Prior Training in Aggressiveness upon Aggressive Behavior." *Journal of Personality and Social Psychology*, 1968, 9, 316-321.

- Geen, R. G. "Perceived Suffering of the Victim as an Inhibitor of Attack-Induced Aggression." *Journal of Social Psychology*, 1970, 81, 209-216.
- Geen, R. G., and Berkowitz, L. "Name-Mediated Aggressive Cue Properties." *Journal of Personality*, 1966, 34, 456-465.
- Geen, R. G., and Berkowitz, L. "Some Conditions Facilitating the Occurrence of Aggression After the Observation of Violence." *Journal of Personality*, 1967, 35, 666-676.
- Geen, R. G., and O'Neal, E. C. "Activation of Cue-Elicited Aggression by General Arousal." *Journal of Personality and Social Psychology*, 1969, 11, 289-292.
- Geen, R. G., and O'Neal, E. C. (Eds.). *Perspectives on Aggression*. New York: Academic Press, 1976.
- Geen, R. G., and Pigg, R. "Acquisition of an Aggressive Response and Its Generalization to Verbal Behavior." *Journal of Personality and Social Psychology*, 1970, 15, 165-170.
- Geen, R. G., and Stonner, D. "Effects of Aggressiveness Habit Strength on Behavior in the Presence of Aggression-Related Stimuli." *Journal of Personality and Social Psychology*, 1971, 17, 149-153.
- Geist, V. "The Evolution of Hornlike Organs." *Behaviour*, 1966, 27, 175-214.
- Gelles, R. J. "Child Abuse as Psychopathology: A Sociological Critique and Reformulation." *American Journal of Orthopsychiatry*, 1973, 43, 611-621.
- Gelles, R. J. *The Violent Home*. Beverly Hills, Calif.: Sage, 1974.
- Gelles, R. J. "Violence and Pregnancy: A Note on the Extent of the Problem and Needed Services." *Family Coordinator*, Jan. 1975, pp. 81-86.
- Gelles, R. J. "Violence Towards Children in the United States." Paper presented at Symposium on Violence at Home and at School, American Association for the Advancement of Science, February 25, 1977.
- German, J., and Singer, A. "Punishing the Not Guilty: Hospitalization of Persons Acquitted by Reason of Insanity." *Rutgers Law Review*, 1976, 1011, 1074-1085.
- Geschwind, N. "Effects of Temporal-Lobe Surgery on Behavior." *New England Journal of Medicine*, 1973, 289, 480-481.
- Geschwind, N. "The Clinical Setting of Aggression in Temporal Lobe Epilepsy." In W. S. Fields and W. H. Sweet (Eds.), *Neural Bases of Violence and Aggression*. St. Louis: Green, 1975.

- Gibbs, E., and Gibbs, F. "Electroencephalographic Evidence of Thalamic and Hypothalamic Epilepsy." *Neurology*, 1951, 1, 136-144.
- Gil, D. G. *Violence Against Children*. Cambridge, Mass.: Harvard University Press, 1975.
- Gillespi, J. "Aggression in Relation to Frustration, Attack and Inhibition." Unpublished doctoral dissertation, University of Pittsburgh, 1961.
- Ginsburg, B., and Allee, W. C. "Some Effects of Conditioning on Social Dominance and Subordination in Inbred Strains of Mice." *Physiological Zoology*, 1942, 15, 485-506.
- Glickman, L., and Blumenfield, M. "Psychological Determinants of 'LSD Reactions.'" *Journal of Nervous and Mental Disease*, 1967, 145, 79-83.
- Gloor, P. Discussion of B. R. Kaada, "Brain Mechanisms Related to Aggressive Behavior." In C. D. Clemente and D. B. Lindsley (Eds.), *Aggression and Defense: Neural Mechanisms and Social Patterns*. Berkeley: University of California Press, 1967.
- Glueck, S., and Glueck, E. *Unraveling Juvenile Delinquency*. Cambridge, Mass.: Harvard University Press, 1950.
- Goffman, E. *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates*. New York: Doubleday, 1961.
- Goldstein, J. H. *The Insanity Defense*. New Haven, Conn.: Yale University Press, 1967.
- Goldstein, J. H. *Aggression and Crimes of Violence*. New York: Oxford University Press, 1975.
- Goldstein, M. "Brain Research and Violent Behavior." *Archives of Neurology*, 1974, 30, 1-35.
- Goode, W. J. "Force and Violence in the Family." *Journal of Marriage and the Family*, 1971, 33, 624-636.
- Goode, W. J. "The Place of Force in Human Society." *American Sociological Review*, 1972, 37 (5), 507-519.
- Goranson, R. E. "Media Violence and Aggressive Behavior: A Review of Experimental Research." In L. Berkowitz (Ed.), *Advances in Experimental Social Psychology*. Vol. 5. New York: Academic Press, 1970.
- Gordon, C. W. *The Social System of the High School*. New York: Free Press, 1957.
- Gouldner, A. W. *Patterns of Industrial Bureaucracy*. New York: Free Press, 1954a.
- Gouldner, A. W. *Wildcat Strike*. New York: Harper & Row, 1954b.

- Graebner, A. *After Eve: The New Feminism*. Minneapolis: Augsburg, 1972.
- Graham, H. D., and Gurr, T. R. *Violence in America: Historical and Comparative Perspectives*. New York: New American Library, 1969.
- Griffith, J. "A Study of Illicit Amphetamine Drug Traffic in Oklahoma City." *American Journal of Psychiatry*, 1966, 123, 560-569.
- Grinspoon, L., and Hedblom, P. *The Speed Culture: Amphetamine Use and Abuse in America*. Cambridge, Mass.: Harvard University Press, 1975.
- Guiteau, C. *The Truth and the Removal*. Washington, D.C.: Guiteau, 1880.
- Guntrip, H. *Psychoanalytic Theory, Therapy, and the Self*. New York: Basic Books, 1973.
- Gurr, T. R. "Sources of Rebellion in Western Societies: Some Quantitative Evidence." *Annals of the American Academy of Political and Social Science*, 1970a, 391, 128-144.
- Gurr, T. R. *Why Men Rebel*. Princeton, N.J.: Princeton University Press, 1970b.
- Gutheil, E. A. "Dreams as an Aid in Evaluating Ego Strength." *American Journal of Psychotherapy*, 1958, 12, 338-355.
- Guttmacher, M. *Sex Offenses: The Problem, Causation and Prevention*. New York: Norton, 1951.
- Guttmacher, M. "Dangerous Offenders." *Crime and Delinquency*, 1963, 9, 381-390.
- Guze, S. B. *Criminality and Psychiatric Disorders*. New York: Oxford University Press, 1976.
- Hall, D. C. *Usefulness of Group Psychotherapy Marathons in Treatment of the Habitual Sexual Offender*. Fort Steilacoom, Wash.: Western State Hospital, 1971.
- Hall, K. R. H. "Aggression in Monkey and Ape Societies." In J. D. Carthy and F. J. Ebling (Eds.), *The Natural History of Aggression*. London: Academic Press, 1964.
- Hall, M. "A Conversation with Karl Menninger." *Psychology Today*, Feb. 1969, p. 9.
- Hall, S. G. *Adolescence: Its Psychology and Its Relations to Physiology, Anthropology, Sociology, Sex, Crime, Religion, and Education*. New York: Appleton-Century-Crofts, 1904.
- Halleck, S. *Psychiatry and the Dilemmas of Crime: A Study of Causes, Punishment, and Treatment*. New York: Harper & Row, 1967.



- Halleck, S. *Psychiatry and the Dilemmas of Crime*. Berkeley: University of California Press, 1971.
- Halleck, S. "Rehabilitation of Criminal Offenders: A Reassessment of the Concept." *Psychiatric Annals*, 1974a, 4 (3).
- Halleck, S. "A Troubled View of Current Trends in Forensic Psychiatry." *Journal of Psychiatry and Law*, Summer 1974b.
- Halleck, S. "Psychodynamic Aspects of Violence." In "Medical, Legal, and Psychosocial Aspects of Violence in Families." *Bulletin of the American Academy of Psychiatry and Law*, 1977, 4 (4), 328-336.
- Halleck, S., and Witte, A. "Is Rehabilitation Dead?" *Crime and Delinquency*, Oct. 1977, pp. 372-382.
- Hanks, S. E., and Rosenbaum, C. P. "Battered Women: A Study of Women Who Live with Violent Alcohol-Abusing Men." *American Journal of Orthopsychiatry*, 1977, 47, 291-306.
- Hanretta, A. "Psychiatric Utilization of Electroencephalography." *Diseases of the Nervous System*, 1965, 26, 409-417.
- Harris, M., and Huang, L. "Aggression and the Attribution Process." *Journal of Social Psychology*, 1974, 92, 209-216.
- Harrison, M., and Pepitone, A. "Contrast Effects in the Use of Punishment." *Journal of Personality and Social Psychology*, 1972, 23, 398-404.
- Hartman, M. *Victorian Murderesses*. New York: Schocken Books, 1977.
- Hartmann, D. P. "Influence of Symbolically Modeled Instrumental Aggression and Pain Cues on Aggressive Behavior." *Journal of Personality and Social Psychology*, 1969, 11, 280-288.
- Hartmann, H. "The Mutual Influences of the Development of Ego and the Id." *Psychoanalytic Study of the Child*, 1952, 7, 9-30.
- Hartmann, H., Kris, E., and Lowenstein, R. "Notes on the Theory of Aggression." *Psychoanalytic Study of the Child*, 1949, 3, 9-36. Reprinted in Hartmann, H., Kris, E., and Lowenstein, R. *Papers on Psychoanalytic Psychology*. Vol. 4. New York: International Universities Press, 1964.
- Hartocollis, P. (Ed.). *Borderline Personality Disorders: The Concept, the Syndrome, the Patient*. New York: International Universities Press, 1977.
- Haug, J. O. "Pneumoencephalographic Evidence of Brain Damage in Chronic Alcoholics." *Acta Psychologica-Scandinavica*, 1968, 203, 135-143.

- Hawthorne, N. *The Scarlet Letter* [1850]. New York: Simon & Schuster, 1955.
- Hayman, C. R. "In Contrast to Amir." *Sexual Behavior*, 1971, 1, 33.
- Heath, R. G., Monroe, R. R., and Mickle, W. A. "Stimulation of the Amygdaloid Nucleus in a Schizophrenic Patient." *American Journal of Psychiatry*, 1955, 111, 862-863.
- Heider, F. *The Psychology of Interpersonal Relations*. New York: Wiley, 1958.
- Helfer, R. E., and Kempe, C. H. (Eds.). *The Battered Child*. (2nd ed.) Chicago: University of Chicago Press, 1972.
- Heller, M. S. "Dangerousness, Diagnosis, and Disposition." *Federal Rules Decision*, 1969, 46, 577-600.
- Henn, F. A., Herjanic, M., and Vanderpearl, R. H. "Forensic Psychiatry: Profiles of Two Types of Sex Offenders." *American Journal of Psychiatry*, 1976, 133, 694-696.
- Henry, C. E. "Positive Spike Discharges in the EEG and Behavior Abnormality." In G. H. Glaser (Ed.), *EEG and Behavior*. New York: Basic Books, 1963.
- Henry, J. *Culture Against Man*. New York: Random House, 1963.
- Henry, J. *On Education*. New York: Random House, 1971.
- Herjanic, M., and Meyer, D. "Notes on the Epidemiology of Homicide in an Urban Area." *Forensic Science*, 1976a, 8, 235-245.
- Herjanic, M., and Meyer, D. "Psychiatric Illness in Homicide Victims." *American Journal of Psychiatry*, 1976b, 133 (6), 691-693.
- Hermachea, C. R., and Hermachea, M. (Eds.). *Confrontation: Violence and the Police*. Boston: Holbrook Press, 1971.
- Herrick, C. J. *Neurological Foundations of Animal Behavior*. New York: Holt, Rinehart and Winston, 1924.
- Herrick, C. J. *An Introduction to Neurology*. (5th ed.) Philadelphia: Saunders, 1931.
- Hill, D. "Cerebral Dysrhythmia: Its Significance in Aggressive Behavior." *Proceedings of the Royal Society of Medicine*, 1944, 37, 317-330.
- Hill, D., and Pond, A. "Reflection on One Hundred Capital Cases Submitted to Electroencephalography." *Journal of Mental Science*, 1952, 98, 23-43.
- Hillman, D. S., and Blackman, N. "Enuresis, Firesetting, and Cruelty to Animals: A Triad Predictive of Adult Crime." *American Journal of Psychiatry*, 1966, 122, 1431-1435.

- Hinde, R. A. "The Biological Significance of the Territories of Birds." *Ibis*, 1956, 98, 340-369.
- Hinde, R. A. "Energy Models of Motivation." *Symposia of the Society for Experimental Biology*, 1960, 14, 199-213.
- Hinde, R. A. *Biological Bases of Human Social Behavior*. New York: McGraw-Hill, 1974.
- Hinde, R. A., and Stevenson-Hinde, J. (Eds.). *Constraints on Learning: Limitations and Predispositions*. New York: Academic Press, 1973.
- Hirschmann, J., and Schmitz, E. "Strukturanalyse der Kindsmörderin." *Zeitschrift für Psychotherapie und medizinische Psychologie*, 1958, 8, 1-20.
- Hoffman, F. G. *A Handbook on Drug and Alcohol Abuse: Biomedical Aspects*. New York: Oxford University Press, 1975.
- Hoffman, L. W. "Early Childhood Experiences and Women's Achievement Motives." *Journal of Social Issues*, 1972, 28, 129-155.
- Hoffman, M. L. "Power Assertion by the Parent and Its Impact on the Child." *Child Development*, 1960, 31, 129-143.
- Hoffman-Bustamente, D. "The Nature of Female Criminality." *Issues in Criminology*, 1973, 8 (2), 117-136.
- Homans, G. C. *Social Behavior: Its Elementary Forms*. New York: Harcourt Brace Jovanovich, 1961.
- Hornberger, R. H. "The Differential Reduction of Aggressive Responses as a Function of Interpolated Activities." *American Psychologist*, 1959, 14, 354.
- Horney, K. *The Neurotic Personality of Our Time*. New York: Norton, 1937.
- Horney, K. *New Ways in Psychoanalysis*. New York: Norton, 1939.
- Hovland, C., and Sears, R. "Minor Studies in Aggression. VI: Correlation of Lynchings with Economic Indices." *Journal of Psychology*, 1940, 9, 301-310.
- Howe, F., and Lauter, P. "How the School System Is Rigged for Failure." *New York Review of Books*, June 18, 1970, pp. 14-20.
- Huebner v. State of Wisconsin*, 1967.
- Huggett, R., and Berry, P. *Daughters of Cain*. London: Allen & Unwin, 1956.
- Huggins, M. D., and Straus, M. A. "Violence and the Social Structure as Reflected in Children's Books from 1850 to 1970." Paper presented at 45th annual meeting of the Eastern Sociological Society, 1975.
- Huntington, S. "The Democratic Distemper." *The Public Interest*, 1975, 41, 9-38.

- Hutchinson, R. R., Ulrich, R. E., and Azrin, N. H. "Effects of Age and Related Factors on the Pain-Aggression Reaction." *Journal of Comparative and Physiological Psychology*, 1965, 59, 365-369.
- Iglitzin, L. B. "Violence and American Democracy." *Journal of Social Issues*, 1970, 26 (1), 165-186.
- Itil, T. M., and Wadud, A. "Treatment of Human Aggression with Major Tranquilizers, Antidepressants, and Newer Psychotropic Drugs." *Journal of Nervous and Mental Disease*, 1975, 160, 83-99.
- Ittelson, W. H., and Kutash, S. B. *Perceptual Changes in Psychopathology*. New Brunswick, N.J.: Rutgers University Press, 1961.
- Ivey, E. F. "Recent Advances in Diagnosis and Treatment of Phobias." *American Journal of Psychotherapy*, 1959, 13, 35-50.
- Ivey, M. E., and Bardwick, J. M. "Patterns of Affective Fluctuation in the Menstrual Cycle." *Psychosomatic Medicine*, 1968, 30, 336-345.
- Jackson, D. D. (Ed.). *The Etiology of Schizophrenia*. New York: Basic Books, 1960.
- Jacobson, E. *The Self and the Object World*. New York: International Universities Press, 1964.
- Jaffe, Y., Malamuth, N., Feingold, J., and Feshbach, S. "Sexual Arousal and Behavioral Aggression." *Journal of Personality and Social Psychology*, 1974, 30, 759-764.
- Jameison, G. R. "Suicide and Mental Disease." *Archives of Neurology and Psychiatry*, 1936, 36, 1.
- Jarman, P. J. "The Social Organization of Antelope in Relation to Their Ecology." *Behaviour*, 1974, 48, 215-267.
- Jencks, C. *Inequality: A Reassessment of the Effect of Family and Schooling in America*. New York: Basic Books, 1972.
- Jenkins, R. L. "The Making of a Sex Offender." *Focus*, 1951, 30, 129-134.
- Jesse, F. C., Jr. "Criteria for Commitment Under the Wisconsin Sex Crimes Act." *Wisconsin Law Review*, 1967, 1967, 980-987.
- Johnson, A. M., and Szurek, S. A. "The Genesis of Antisocial Acting Out in Children and Adults." *Psychoanalytic Quarterly*, 1952, 21, 323-343.
- Jones, E. *The Life and Work of Sigmund Freud*. Vol. 1. New York: Basic Books, 1953.
- Jones, E., Bagchi, B., and Waggoner, R. "Focal Abnormalities of the Electroencephalogram in Juvenile Behavior Dis-

- orders." *Journal of Nervous and Mental Disease*, 1955, 122, 28-35.
- Jones, H. M. *Violence and Reason: A Book of Essays*. New York: Atheneum, 1969.
- Joslyn, W. D. "Androgen-Induced Social Dominance in Infant Female Rhesus Monkeys." *Journal of Child Psychology and Psychiatry*, 1973, 14, 137-145.
- Jung, C. G. *Modern Man in Search of a Soul*. New York: Harcourt Brace Jovanovich, 1933.
- Kadish, M. R., and Kadish, S. H. "The Institutionalization of Conflict: Jury Acquittals." *Journal of Social Issues*, 1971, 27 (2), 199-217.
- Kagan, J., and Moss, H. A. *Birth to Maturity: A Study in Psychological Development*. New York: Wiley, 1962.
- Kahn, M. W. "The Effect of Severe Defeat at Various Age Levels on the Aggressive Behavior of Mice." *Journal of Genetic Psychology*, 1951, 79, 117-130.
- Kahn, M. W. "Correlates of Rorschach Reality Adherence in the Assessment of Murderers Who Plead Insanity." *Journal of Projective Techniques and Personality Assessment*, 1967, 31, 44-47.
- Kahn, R. L. "Violent Man: Who Buys Bloodshed and Why." *Psychology Today*, June 1972, 6 (1), 46-48, 83.
- Kalin, R., McClelland, D. C., and Kahn, M. "The Effects of Male Social Drinking on Fantasy." *Journal of Personality and Social Psychology*, 1965, 1, 441-452.
- Kalren, H., and Zeisel, H. "Law, Science, and Humanism." In J. Huxley (Ed.), *The Humanist Frame*. New York: Harper & Row, 1962.
- Kanfer, F. H. "Vicarious Human Reinforcement: A Glimpse into the Black Box." In L. Krasner and L. P. Ullmann (Eds.), *Research in Behavior Modification*. New York: Holt, Rinehart and Winston, 1965.
- Kaplan, J. *Marijuana: The New Prohibition*. New York: Simon & Schuster, 1971.
- Katz, E. "The Two-Step Flow of Communication." *Public Opinion Quarterly*, 1957, 21, 61-78.
- Katz, J., and Goldstein, J. "Abolish the Insanity Defense—Why Not?" *Yale Law Journal*, 1963, 72, 853-870.
- Keith, C. G., and Kuhner, S. "A Simplified Format for Consciousness Raising." Unpublished manuscript, 1973.
- Kelman, H. C., and Lawrence, L. H. "American Response to the Trial of Lt. William L. Calley." *Psychology Today*, June 1972, 6 (1), 41-45, 78-81.

- Kempe, C. H., Silverman, B. F., Steele, B. F., Droegemueller, W., and Silver, H. K. "The Battered Child Syndrome." *Journal of the American Medical Association*, 1962, 181, 17-24.
- Keniston, K. *Youth and Dissent: The Rise of A New Opposition*. New York: Harcourt Brace Jovanovich, 1971.
- Kennedy, F., Hoffman, H., and Haines, W. "A Study of William Heirens." *American Journal of Psychiatry*, 1947, 104, 113-121.
- Kernberg, O. *Borderline Conditions and Pathological Narcissism*. New York: Aronson, 1975.
- Khantzian, E. J. "Opiate Addiction: A Critique of Theory and Some Implications for Treatment." *American Journal of Psychotherapy*, 1974, 28, 59-71.
- Kimmel, S. *The Mad Booths of Maryland*. Indianapolis: Bobbs-Merrill, 1940.
- King, C. H. "The Ego and the Integration of Violence in Homicidal Youth." *American Journal of Orthopsychiatry*, 1975, 45, 134-145.
- Kitsuse, J. I., and Dietrick, D. C. "Delinquent Boys: A Critique." In H. L. Voss (Ed.), *Society, Delinquency, and Delinquent Behavior*. Boston: Little, Brown, 1970.
- Klee, G. D. "Lysergic Acid Diethylamide (LSD-25) and Ego Functions." *Archives of General Psychiatry*, 1963, 8, 461-474.
- Klein, D. "The Etiology of Female Crime." *Issues in Criminology*, 1973, 8 (2), 3-30.
- Klepfisz, A., and Racy, J. "Homicide and LSD." *Journal of the American Medical Association*, 1973, 223, 429-430.
- Kling, A. "Frontal and Temporal Lobe Lesions and Aggressive Behavior." In W. L. Smith and A. Kling (Eds.), *Issues in Brain/Behavior Control*. Englewood Cliffs, N.J.: Prentice-Hall, 1976.
- Klüver, H., and Bucy, P. C. "'Psychic Blindness' and Other Symptoms Following Bilateral Temporal Lobectomy in Rhesus Monkeys." *American Journal of Physiology*, 1937, 119, 352-253.
- Klüver, H., and Bucy, P. C. "Preliminary Analysis of Functions of the Temporal Lobes in Monkeys." *Archives of Neurology and Psychiatry*, 1939, 42, 979-1000.
- Knipmeyer, J., and Presthaltdt, P. "The Influence of Environmental Noise upon Group Aggression." Paper presented at meeting of the Southeastern Psychological Association, 1973.
- Knudsen, K. "Homicide After Treatment with Lysergic Acid

- Diethylamide." *Acta Psychiatrica Scandinavica*, 1965, Supplement 180, 389-395.
- Knutson, J. F. "Aggression During the Fixed-Ratio and Extinction Components of a Multiple Schedule of Reinforcement." *Journal of the Experimental Analysis of Behavior*, 1970, 13, 221-231.
- Knutson, J. F. "The Effects of Shocking One Member of a Pair of Rats." *Psychonomic Science*, 1971, 22, 265-266.
- Kohl, H. *The Open Classroom*. New York: New York Review of Books, 1969.
- Kohlberg, L. "Development of Moral Character and Moral Ideology." In M. L. Hoffman and L. W. Hoffman (Eds.), *Review of Child Development Research*. New York: Russell Sage Foundation, 1964.
- Kohlberg, L. "The Cognitive-Developmental Approach to Socialization." In D. A. Goslin (Ed.), *Handbook of Socialization Theory and Research*. Chicago: Rand McNally, 1969.
- Kohn, M. L. *Class and Conformity: A Study in Values*. Homewood, Ill.: Dorsey Press, 1969.
- Kohut, H. *The Analysis of the Self: A Systematic Approach to the Psychoanalytic Treatment of Narcissistic Personality Disorders*. New York: International Universities Press, 1971.
- Kohut, H. *The Restoration of the Self*. New York: International Universities Press, 1977.
- Kolb, L. C. "Control of Violence." *Research Publications of the Association for Research in Nervous and Mental Disease*, 1974, 52, 313-318.
- Konečni, V. "The Mediation of Aggressive Behavior: Arousal Level Versus Anger and Cognitive Labeling." *Journal of Personality and Social Psychology*, 1975, 32, 706-712.
- Kovach, J. "School Structure/Atmosphere and Antisocial Student Behavior." Paper Presented at 26th annual Regional Institute, District of Columbia Sociological Society, April 23, 1977.
- Kozol, H. L., Boucher, R. J., and Garofalo, R. F. "The Diagnosis and Treatment of Dangerousness." *Crime and Delinquency*, 1972, 18, 371-392.
- Kozol, H. L., Cohen, M. I., and Garofalo, R. F. "The Criminally Dangerous Sex Offender." *New England Journal of Medicine*, 1966, 275, 79-84.
- Kozol, J. *Death at an Early Age*. Boston: Houghton Mifflin, 1968.
- Kraepelin, E. *Psychiatrie*. Leipzig: Johann Ambrosius Barth, 1896.

- Krafft-Ebing, R. *Psychopathia Sexualis* [1886]. (F. J. Rebman, Trans.) New York: Physicians and Surgeons Book Company, 1934.
- Kramer, J. C. "The Adolescent Addict: The Progression of Youth Through the Drug Culture." *Clinical Pediatrics*, 1972, 11, 382-385.
- Kramer, J. C., Fischman, V. S., and Littlefield, D. C. "Amphetamine Abuse: Pattern and Effects of High Doses Taken Intravenously." *Journal of the American Medical Association*, 1967, 201, 305-309.
- Kramer, S. N. *From the Tablets of Sumer*. Indian Hills, Colo.: Falcon's Wing Press, 1956.
- Kreuz, L. E., and Rose, R. J. "Assessment of Aggressive Behavior and Plasma Testosterone in a Young Criminal Population." *Psychosomatic Medicine*, 1972, 34, 321-332.
- Kriesberg, L. *The Sociology of Social Conflicts*. Englewood Cliffs, N.J.: Prentice-Hall, 1973.
- Kruuk, H. *The Spotted Hyena: A Study of Predation and Social Behavior*. Chicago: University of Chicago Press, 1972.
- Krystal, H. "The Problem of the Survivor." In H. Krystal (Ed.), *Massive Psychic Trauma*. New York: International Universities Press, 1968.
- Kuhn, T. S. *The Structure of Scientific Revolutions*. Chicago: University of Chicago Press, 1962.
- Kummer, H. *Primate Societies: Group Techniques of Ecological Adaptation*. Chicago: Aldine, 1971.
- Kutash, I. L., and Schlesinger, L. B. "Successful Psychological Defense: Probing the Defendant's Mind." *Journal of the New Jersey State Bar Association*, May 1977, 79, 14-18.
- Kutash, S. B. "Treatment of Symptoms, Perceptual Flexibility, and Ego Boundaries." Paper presented at meeting of Eastern Psychological Association, 1963.
- Kutash, S. B. "Psychoneuroses." In B. B. Wolman (Ed.), *Handbook of Clinical Psychology*. New York: McGraw-Hill, 1965.
- Kutash, S. B. "Modified Psychoanalytic Therapies." In B. B. Wolman (Ed.), *The Therapist's Handbook*. New York: Van Nostrand Reinhold, 1976.
- Lack, D. *Ecological Adaptations for Breeding in Birds*. London: Chapman and Hall, 1968.
- Lack, D. "Of Birds and Men." *New Scientist*, 1969, pp. 121-122.
- Lanzkron, J. "Murder as Reaction to Paranoid Delusions in Involutional Psychosis and Its Prevention." *American Journal of Psychiatry*, 1961, 118, 426-427.



- Lanzkron, J. "Murder and Insanity." *American Journal of Psychiatry*, 1963, 119, 754-758.
- Lasswell, H. "Foreword." In R. Arens (Ed.), *The Insanity Defense*. New York: Philosophical Library, 1974.
- Latané, B., and Darley, J. "Group Inhibition of Bystander Intervention in Emergencies." *Journal of Personality and Social Psychology*, 1968, 10, 215-221.
- Lawick-Goodall, J. van. "Behaviour of Free-Living Chimpanzees of the Gombe Stream Area." *Animal Behaviour Monographs*, 1968, 3.
- Lawick-Goodall, J. van. *In the Shadow of Man*. London: Collins, 1971.
- Leary, T., Metzner, R., and Alpert, R. *The Psychedelic Experience: A Manual Based on the Tibetan Book of the Dead*. New York: Citadel Press, 1964.
- Lee, J. C. "Effect of Alcohol Injections on the Blood-Brain Barrier." *Quarterly Journal of Studies on Alcohol*, 1962, 23, 4-16.
- Lee, P. C. "Psychology and Sex Differences." In P. C. Lee and R. S. Stewart (Eds.), *Sex Differences*. New York: Urizen Books, 1976.
- Lennox, W. *Epilepsy and Related Disorders*. Vol. 2. Boston: Little, Brown, 1960.
- Lent, P. C. "A Preliminary Study of the Okavango Lechwe (*Kobus leche* Gray)." *East African Wildlife Journal*, 1969, 7, 147-157.
- Lerner, M. J. "Observer Evaluation of a Victim: Justice, Guilt, and Veridical Perception." *Journal of Personality and Social Psychology*, 1971, 20, 127-135.
- Lester, D. "External Restraints, Suicide, and Homicide: Comparison of Norway and France." *Perceptual and Motor Skills*, 1973a, 36, 646.
- Lester, D. "Murder: A Review." *Corrective and Social Psychiatry and Journal of Applied Behavior Therapy*, 1973b, 19 (4), 40-50.
- Lester, D., Kendra, J. M., and Perdue, W. C. "Distinguishing Murderers from Suicides with the Rorschach." *Perceptual and Motor Skills*, 1974, 39, 474.
- Lester, D., Kendra, J. M., Thisted, R. A., and Perdue, W. C. "Prediction of Homicides with the Rorschach." *Perceptual and Motor Skills*, 1975, 41, 752.
- Lester, D., and Perdue, W. C. "Suicide, Homicide, and Color-Shading Response on the Rorschach." *Perceptual and Motor Skills*, 1972, 35, 562.

- Lester, D., and Perdue, W. C. "Movement Responses of Murderers to Rorschach Stimuli." *Perceptual and Motor Skills*, 1973, 37, 668.
- Lester, D., and Perdue, W. C. "Body Image of Murderers." *Journal of General Psychology*, 1974, 90, 187-189.
- LeVine, R. A. "Gusii Sex Offenses: A Study in Social Control." *American Anthropologist*, 1959, 61, 965-990.
- Levine, W., and Bornstein, P. E. "Is the Sociopath Treatable? The Contribution of Psychiatry to a Legal Dilemma." *Washington University Law Quarterly*, 1972, 1972, 693-701.
- Levinger, G. "Sources of Marital Dissatisfaction Among Applicants for Divorce." *American Journal of Orthopsychiatry*, 1966, 26, 803-807.
- Lewin, K. *A Dynamic Theory of Personality*. New York: McGraw-Hill, 1935.
- Lewin, K. "Group Decision and Social Change." In T. M. Newcomb and E. L. Hartley (Eds.), *Readings in Social Psychology*. New York: Holt, Rinehart and Winston, 1947.
- Lewis, J. A. "Violence and Epilepsy." *Journal of the American Medical Association*, 1975, 232, 1165-1167.
- Lewis, M. "Parents and Children: Sex-Role Development." *School Review*, 1972, 80, 229-240.
- Ley, A., and Versele, S. "L'Aveu." *Annales Médico-Psychologiques*, 1951, 109, 1-21.
- Leyens, J., Camino, L., Parke, R. D., and Berkowitz, L. "Effects of Movie Violence on Aggression in a Field Setting as a Function of Group Dominance and Cohesion." *Journal of Personality and Social Psychology*, 1975, 32, 346-360.
- Leyhausen, P. "The Communal Organization of Solitary Mammals." *Symposia of the Zoological Society of London*, 1965, 14, 249-263.
- Lieberson, S., and Silverman, A. R. "The Precipitants and Underlying Conditions of Race Riots." *American Sociological Review*, 1965, 30, 887-898.
- Lifton, R. J. "Woman as Knower: Some Psychohistorical Perspectives." In R. J. Lifton (Eds.), *The Woman in America*. Boston: Beacon Press, 1965.
- Lifton, R. J. *Home from the War*. New York: Simon & Schuster, 1973.
- Lill, A. "Social Organization and Space Utilization in the Lek-Forming White-Bearded Manakin *Manacus manacus trinitatis* Hartert." *Zeitschrift für Tierpsychologie*, 1974, 36, 513-530.
- Lincoln, A. J. "Justifications and Condemnations of Violence:

- A Typology of Responses and a Research Review." *Sociological Symposium*, 1973, 9, 51-68.
- Lindner, R. M. "The Equivalents of Matricide." *Psychoanalytic Quarterly*, 1948, 17, 453-470.
- Lion, J. R. *Evaluation and Management of the Violent Patient*. Springfield, Ill.: Thomas, 1972.
- Lion, J. R. "Diagnosis and Treatment of Personality Disorders." In J. R. Lion (Ed.), *Personality Disorders: Diagnosis and Management*. Baltimore: Williams & Wilkins, 1974.
- Lion, J. R. "Conceptual Issues in the Use of Drugs for the Treatment of Aggression in Man." *Journal of Nervous and Mental Disease*, 1975, 160, 76-82.
- Lion, J. R., and Bach-y-Rita, G. "Group Psychotherapy with Violent Outpatients." *International Journal of Group Psychotherapy*, 1970, 20, 185-191.
- Lion, J. R., Bach-y-Rita, G., and Ervin, F. R. "Violent Patients in the Emergency Room." *American Journal of Psychiatry*, 1969, 125, 12.
- Lion, J. R., Bach-y-Rita, G., and Ervin, F. R. "Restraining the Violent Patient." *J.P.N. and Mental Health Services*, March-April 1972, pp. 9-10.
- Lion, J. R., Christopher, R., and Madden, D. J. "A Group Approach with Violent Patients." *International Journal of Group Psychotherapy*, 1977, 27, 1.
- Lion, J. R., and Penna, M. "The Study of Human Aggression." In R. E. Whalen (Ed.), *The Neuropsychology of Aggression*. New York: Plenum Press, 1974.
- Livingston, S. "Epilepsy and Murder." *Journal of the American Medical Association*, 1964, 188, 172-181.
- Loew, C. A. "Acquisition of a Hostile Attitude and Its Relationship to Aggressive Behavior." *Journal of Personality and Social Psychology*, 1967, 5, 335-341.
- Logan, F. A., and Boice, R. "Aggressive Behaviors of Paired Rodents in an Avoidance Context." *Behaviour*, 1969, 34, 161-183.
- Lombroso, C., and Ferrero, G. *The Female Offender*. New York: Appleton-Century-Crofts, 1897.
- Longstreth, L. E. "Distance to Goal and Reinforcement Schedule as Determinants of Human Instrumental Behavior." Paper presented at the 74th annual Convention of the American Psychological Association, 1966.
- Lopate, P. *Being with Children*. New York: Doubleday, 1975.
- Lorenz, K. "The Comparative Method in Studying Innate Be-

- haviour Patterns." *Symposia of the Society for Experimental Biology*, 1950, 4, 221-268.
- Lorenz, K. "Ritualized Fighting." In J. D. Carthy and F. J. Ebling (Eds.), *The Natural History of Aggression*. London: Academic Press, 1964.
- Lorenz, K. *On Aggression*. New York: Harcourt Brace Jovanovich, 1966.
- Lukianowicz, N. "Attempted Infanticide." *Psychiatria Clinica*, 1972, 5, 1016.
- Lunde, D. *Murder and Madness*. San Francisco: San Francisco Book Company, 1976.
- Lykken, T. "Psychology and Lie Detector Industry." *American Psychologist*, 1974, 29, 725-739.
- Lystad, M. (Ed.). *An Annotated Bibliography: Violence at Home*. Rockville, Md.: National Institute of Mental Health, 1974.
- Maccoby, E. E., and Jacklin, C. *The Psychology of Sex Differences*. Stanford, Calif.: Stanford University Press, 1974.
- MacDonald, G. J., and di Furia, G. "A Guided Self-Help Approach to the Treatment of the Habitual Sex Offender." *Hospital and Community Psychiatry*, 1971, 22, 310-313.
- MacDonald, G. J., and Williams, R. A. *Characteristics and Management of Committed Sexual Offenders in the State of Washington*. Fort Steilacoom, Wash.: Western State Hospital, 1971.
- MacDonald, J. H. *The Murderer and His Victim*. Springfield, Ill.: Thomas, 1961.
- MacDonald, J. H. "The Threat to Kill." *American Journal of Psychiatry*, 1963, 120, 125-130.
- MacDonald, J. H. *Homicidal Threats*. Springfield, Ill.: Thomas, 1968.
- MacDonald, J. H. *Rape: Offenders and Their Victims*. Springfield, Ill.: Thomas, 1971.
- Macindoe, I. *Therapeutic Treatments for Sex Offenders*. Minneapolis: Research Laboratories of Department of Psychiatry, University of Minnesota, 1971.
- Mack, R. W., and Snyder, R. C. "The Analysis of Social Conflict: Toward an Overview and Synthesis." *Journal of Conflict Resolution*, 1957, 1, 212-248.
- Madden, D. J. "Voluntary and Involuntary Treatment of Aggressive Patients." *American Journal of Psychiatry*, 1977, 134, 553-555.
- Madden, D. J., and Lion, J. R. *Rage, Hate, Assault, and Other*

- Forms of Violence*. Englewood Cliffs, N.J.: Prentice-Hall, 1976.
- Madsen, C., Jr. "Nurturance and Modeling in Preschoolers." *Child Development*, 1968, 39, 221-236.
- Mahler, M. *On Human Symbiosis and the Vicissitudes of Individuation*. New York: International Universities Press, 1968.
- Mahler, M., Pine, F., and Bergman, A. *The Psychological Birth of the Human Infant*. New York: Basic Books, 1975.
- Maier, H. W. "Über Katathyme Wahnbildung und Paranoia." *Zeitschrift für Neurologie und Psychiatrie*, 1912, 13, 555.
- Malamud, N. "Psychiatric Disorder with Intracranial Tumors of the Limbic System." *Archives of Neurology*, 1967, 17, 113-123.
- Malik, M., and Sawi, O. "A Profile of Homicide in the Sudan." *Forensic Science*, 1976, 7, 141-150.
- Malinowski, B. "The Sexual Life of Savages in Northwestern Melanesia." *Eugenics*, 1929, pp. 1-54.
- Map v. Ohio*. 367 U.S. 643 (1961).
- Mark, V. H. "Does Experimental Neurology Provide an Adequate Basis to Evaluate Human Neurology?" *Contemporary Psychology*, 1975, 20, 888-889.
- Mark, V. H., and Ervin, F. R. *Violence and the Brain*. New York: Harper & Row, 1970.
- Mark, V. H., Ervin, F. R., and Sweet, W. H. "Deep Temporal Lobe Stimulation in Man." In B. E. Eleftheriou (Ed.), *The Neurobiology of the Amygdala*. New York: Plenum, 1972.
- Mark, V. H., Ervin, F. R., Sweet, W. H., and Delgado, J. M. R. "Remote Telemeter Stimulation and Recording from Implanted Temporal Lobe Electrodes." *Confinia Neurologica*, 1969, 31, 86-93.
- Mark, V. H., and Ordia, I. J. "The Controversies over the Use of Neurosurgery in Aggressive States." In T. P. Morley (Ed.), *Current Controversies in Neurosurgery*. Philadelphia: Saunders, 1976.
- Mark, V. H., and Southgate, M. T. "Violence and Brain Disease: Clinical Pathological Conference." *Journal of the American Medical Association*, 1971, 216, 1025-1034.
- Mark, V. H., and Sweet, W. H. "The Role of Limbic Brain Dysfunction in Aggression." In S. H. Frazier (Ed.), *Aggression*. Baltimore: Williams & Wilkins, 1974.
- Marks, I. M. "Management of Sexual Disorders." In H. Leitenberg (Ed.), *Behavior Modification and Behavior Therapy*. Englewood Cliffs, N.J.: Prentice-Hall, 1976.

- Marler, P. "On Animal Aggression: The Roles of Strangeness and Familiarity." *American Psychologist*, 1976, 31, 239-246.
- Marler, P., and Hamilton, W. J., III. *Mechanisms of Animal Behavior*. New York: Wiley, 1966.
- Marmor, J. "Changing Patterns of Femininity." In J. B. Miller (Ed.), *Psychoanalysis and Women*. Harmondsworth, Middlesex, England: Penguin Books, 1973.
- Marquis, D. *Archy and Mehitabel*. New York: Doubleday, 1949.
- Martin, D. *Battered Wives*. San Francisco: Glide Publications, 1976.
- Martinson, R. "What Works: Questions and Answers About Prison Reform." *The Public Interest*, Spring 1974.
- Marx, G. T. "Civil Disorder and the Agents of Social Control." *Journal of Social Issues*, 1970, 26, 19-57.
- Marx, K., and Engels, F. *Wage Labour and Capital* [1849]. In *Selected Works*. Vol. 1. Moscow: Foreign Languages Publishing House, 1955.
- Mathis, J. L., and Collins, M. "Mandatory Group Therapy for Exhibitionists." *American Journal of Psychiatry*, 1970a, 126, 1162-1167.
- Mathis, J. L., and Collins, M. "Progressive Phases in the Group Therapy of Exhibitionists." *International Journal of Group Psychotherapy*, 1970b, 20, 163-169.
- Mathis, J. L., and Collins, M. "Enforced Group Treatment of Exhibitionists." In J. H. Masserman (Ed.), *Current Psychiatric Therapies*. Vol. 11. New York: Grune & Stratton, 1971.
- Matthews, L. H. "Overt Fighting in Mammals." In J. D. Carthy and F. J. Ebling (Eds.), *The Natural History of Aggression*. London: Academic Press, 1964.
- Mattucek, P. "Late Symptomatology Among Former Concentration Camp Inmates." In S. Arieti (Ed.), *The World Biennial of Psychiatry and Psychotherapy*. New York: Basic Books, 1971.
- Matza, D. *Delinquency and Drift*. New York: Wiley, 1964.
- Maudsley, H. *Responsibility in Mental Disease*. New York: Appleton-Century-Crofts, 1874.
- Mayfield, D. "Alcoholism, Alcohol Intoxication, and Assaultive Behavior." *Diseases of the Nervous System*, 1976, 37 (5), 288-291.
- Mayman, M. *Form Quality of Rorschach Responses*. Topeka: Menninger Foundation, 1964. (Mimeograph.)
- McCaldon, R. J. "Rape." *Canadian Journal of Corrections*, 1967, 9, 37-43.

- McClelland, D. "Wanted: A New Self-Image for Women." In R. J. Lifton (Ed.), *The Woman in America*. Boston: Beacon Press, 1965.
- McClelland, D., and Apicella, F. S. "A Functional Classification of Verbal Responses to Experimentally Induced Failure." *Journal of Abnormal and Social Psychology*, 1945, 40, 376-390.
- McCord, W., and Howard, J. "Negro Opinions in Three Riot Cities." *American Behavioral Scientist*, 1968, 11, 24-27.
- McCord, W., McCord, J., and Zola, I. K. *Origins of Crime: A New Evaluation of the Cambridge-Somerville Youth Study*. New York: Columbia University Press, 1959.
- McDermaid, G., and Winkler, E. G. "Psychopathology of Infanticide." *Journal of Clinical and Experimental Psychopathology*, 1955, 16, 22-41.
- McDougall, W. *Social Psychology*. London: Methuen, 1908.
- McFarland, R. A., Ryan, G. A., and Dingman, R. "Etiology of Motor-Vehicle Accidents." *New England Journal of Medicine*, 1968, 278, 1383-1388.
- McGarry, L. "Demonstration and Research in Competency for Trial and Mental Illness: Review and Preview." *Boston University Law Review*, 1969, 49, 46-53.
- McGlynn, R., Megas, J., and Benson, D. "Sex and Race as Factors Affecting the Attribution of Insanity in a Murder Trial." *Journal of Psychology*, 1976, 93, 93-99.
- McHugh, P. "Social Requisites of Radical Individual Change." Paper presented at annual meeting of the American Sociological Association, Montreal, Canada, August 1964.
- McLaurin, R. L., and Heimer, F. "The Syndrome of Temporal Lobe Contusion." *Journal of Neurosurgery*, 1965, 23, 296-304.
- McNamee, H. B., Mello, N. K., and Mendelson, J. "Experimental Analysis of Drinking Patterns of Alcoholics: Current Psychiatric Observations." *American Journal of Psychiatry*, 1968, 124, 1063-1069.
- McPhail, C. "Civil Disorder Participation: A Critical Examination of Recent Research." *American Sociological Review*, 1971, 36, 1058-1072.
- Mead, M. *Sex and Temperament in Three Savage Tribes*. New York: Morrow, 1935.
- Mead, M. "Cultural Factors in the Cause and Prevention of Pathological Homicide." *Bulletin of the Menninger Clinic*, 1964, 28, 11-22.
- Mech, L. D. *The Wolf: The Ecology and Behavior of an Endan-*

- gered Species*. New York: Doubleday, Natural History Press, 1970.
- Mednick, M., and Weissman, H. "The Psychology of Women, Selected Topics." *Annual Review of Psychology*, 1975, 26, 1-18.
- Megargee, E. I. "Undercontrolled and Overcontrolled Personality Types in Extreme and Social Aggression." *Psychological Monographs*, 1966, 80 (611, entire issue).
- Meggitt, M. *Blood Is Their Argument*. Palo Alto, Calif.: Mayfield, 1977.
- Meili, B. *Familie, Schule, Freunde, und Jugenddelinquenz*. Zurich, Switzerland: Institute of Sociology, University of Zurich, 1975. (Mimeograph.)
- Menaker, E. "Masochism: A Defense Reaction of the Ego." *Psychoanalytic Quarterly*, 1953, 22, 205-220.
- Mendelsohn, B. "A New Branch of Bio-Psychosocial Science: Victimology." *Revue Internationale de Criminologie et de Police Technique*, No. 2, 1956a.
- Mendelsohn, B. "Victimologie." *Études Internationales de Psycho-Sociologie Criminelle*, No. 11, 1956b.
- Mendelsohn, B. "The Origin of the Doctrine of Victimology." *Excerpta Criminologica*, 1963, 3 (3), 239-244.
- Menninger, K. *The Crime of Punishment*. New York: Viking Press, 1968.
- Menninger, K., and Mayman, M. "Episodic Dyscontrol: A Third Order of Stress Adaptation." *Bulletin of the Menninger Clinic*, 1956, 20, 153-163.
- Menninger, K., Mayman, M., and Pruyser, P. *The Vital Balance*. New York: Viking Press, 1963.
- Menzer, L., Sabin, T., and Mark, V. H. "Computerized Axial Tomography: Use in the Diagnosis of Dementia." *Journal of the American Medical Association*, 1975, 234, 754-757.
- Mernick, B., and Hurley, J. "Distinctive Personality Attributes of Child-Abusing Mothers." *Journal of Counseling and Clinical Psychology*, 1969, 33 (6), 746-749.
- Merton, R. "Social Structure and Anomie." In R. Anshen (Ed.), *The Family: Its Functions and Destiny*. New York: Harper & Row, 1949.
- Merton, R. *Social Theory and Social Structure*. New York: Free Press, 1968.
- Meyer, T. P. "Some Effects of Real Newsfilm Violence on the Behavior of Viewers." *Journal of Broadcasting*, 1971, 15, 275-285.
- Meyer, T. P. "The Effects of Sexually Arousing and Violent



- Films on Aggressive Behavior." *Journal of Sex Research*, 1972, 8, 324-333.
- Meyerson, A. "Amnesia for Homicide." *Archives of General Psychiatry*, 1966, 14, 509-515.
- Milgram, S. *Obedience to Authority*. New York: Harper & Row, 1974.
- Miller, D., and Looney, J. "The Prediction of Adolescent Homicide: Episodic Dyscontrol and Dehumanization." *American Journal of Psychoanalysis*, 1974, 34 (3), 187-198.
- Miller, J. K. "Perspectives on Child Maltreatment in the Military." In R. E. Helfer and C. H. Kempe (Eds.), *Child Abuse and Neglect: The Family and the Community*. Cambridge, Mass.: Ballinger, 1976.
- Miller, N. E. "The Frustration-Aggression Hypothesis." *Psychological Review*, 1941, 48, 337-342.
- Miller, W. B. "Lower Class Culture as a Generating Milieu of Gang Delinquency." *Journal of Social Issues*, 1958, 14, 5-19.
- Miranda v. Arizona*. 384 U.S. 436 (1966).
- "M'Naghten's Case." 8 *English Reports and House of Lords* 78 (1843).
- Mohr, J. W. *Rape and Attempted Rape*. Toronto, Canada: Toronto Hospital, 1965. (Mimeograph.)
- Mohr, J. W., and McKnight, C. K. "Violence as a Function of Age and Relationship with Special Reference to Matricide." *Canadian Psychiatric Association Journal*, 1971, 16, 29-32.
- Mohr, J. W., Turner, R. E., and Jerry, M. B. *Pedophilia and Exhibitionism*. Toronto, Canada: University of Toronto Press, 1964.
- Monahan, J. "The Prediction of Violence." In D. Chappell and J. Monahan (Eds.), *Violence and Criminal Justice*. Lexington, Mass.: Lexington Books, 1974.
- Money, J., and Ehrhardt, A. "Fetal Hormones and the Brain: Effect on Sexual Dimorphism of Behavior." In P. C. Lee and R. S. Stewart (Eds.), *Sex Differences*. New York: Urizen Books, 1976.
- Monroe, R. R. *Episodic Behavioral Disorders: A Psychodynamic and Neurophysiologic Analysis*. Cambridge, Mass.: Harvard University Press, 1970.
- Monroe, R. R. "Anticonvulsants in the Treatment of Aggression." *Journal of Nervous and Mental Disease*, 1975, 160, 119-126.
- Montagu, A. *The Direction of Human Development*. New York: Harper & Row, 1955.

- Montagu, A. (Ed.). *Man and Aggression*. (2nd ed.) London: Oxford University Press, 1973.
- Morris, D. *The Naked Ape*. New York: McGraw-Hill, 1967.
- Morris, M., Gould, R., and Matthews, P. "Toward Prevention of Child Abuse." *Children*, 1964, 11, 55-60.
- Morris, N. *The Future of Imprisonment*. Chicago: University of Chicago Press, 1974.
- Morris, N., and Jacobs, J. *Proposals for Prison Reform*. Public Affairs Pamphlet 150. New York: Public Affairs Committee, 1974.
- Moscovici, S., and Faucheux, C. "Social Influence, Conformity, Bias, and the Study of Active Minorities." In L. Berkowitz (Ed.), *Advances in Experimental Social Psychology*. Vol. 6. New York: Academic Press, 1972.
- Moss, H. "Sex, Age, and State as Determinants of Mother-Infant Interactions." In P. C. Lee and R. S. Stewart (Eds.), *Sex Differences*. New York: Urizen Books, 1976.
- Motz, A. "Criminal Law: Wisconsin's Sexual Deviate Act." *Wisconsin Law Review*, 1954, 1954, 324-335.
- Moulton, R. "The Role of Clara Thompson in the Psychoanalytic Study of Women." In J. Strouse (Ed.), *Women and Analysis*. New York: Grossman, 1974.
- Mowat, R. *Morbid Jealousy and Murder*. London: Tavistock, 1966.
- Mullan, J. "Violent Behavior." Case report presented at the Central Neurosurgical Society, Chicago, March 1971.
- Mulvihill, D., Tumin, M. M., and Curtis, L. A. *Crimes of Violence*. A staff report to the National Commission on the Causes and Prevention of Violence. Washington, D.C.: U.S. Government Printing Office, 1969.
- Murphy, B. "Examining the Offender: Some Procedures and Peculiarities." *Journal of Nervous and Mental Disease*, 1958, 126, 554-567.
- Murray, H. A. *Explorations in Personality*. New York: Oxford University Press, 1938.
- Murray, H. A. *Thematic Apperception Test*. Cambridge, Mass.: Harvard University Press, 1943.
- Myers, S. "Maternal Filicide." *American Journal of Disabilities of Children*, 1970, 120, 534-536.
- Narabayashi, H., and Uno, M. "Long-Range Results of Stereotaxic Amygdalotomy for Behavioral Disorders." *Confinia Neurologica*, 1966, 27, 168-171.
- Nashold, B. S., Jr., Flanigin, H., Jr., Wilson, W. P., and Stewart,

- B. "Stereotactic Evaluation of Bitemporal Epilepsy with Electrodes and Lesions." *Confinia Neurologica*, 1973, 35, 94-100.
- Nathan, P. E., and Lisman, S. A. "Behavioral and Motivational Patterns of Chronic Alcoholics." In R. E. Tarter and A. A. Sugerman (Eds.), *Alcoholism: Interdisciplinary Approaches to an Enduring Problem*. Reading, Mass.: Addison-Wesley, 1976.
- National Commission on the Causes and Prevention of Violence. Staff report. *Crimes of Violence*. Washington, D.C.: U.S. Government Printing Office, 1969a.
- National Commission on the Causes and Prevention of Violence. Final report. *To Establish Justice to Insure Domestic Tranquility*. Washington, D.C.: U.S. Government Printing Office, 1969b.
- National Commission on Marijuana and Drug Abuse. *Marijuana: A Signal of Misunderstanding*. Washington, D.C.: U.S. Government Printing Office, 1972.
- National Institute of Education. *The NIE Safe School Study: Concepts and Design*. Washington, D.C.: National Institute of Education, 1975. (Mimeograph.)
- National Institute on Drug Abuse. *Polydrug Use: An Annotated Bibliography*. Rockville, Md.: National Clearinghouse for Drug Abuse Information, 1975.
- Neiderland, W. B. "Psychiatric Evaluation of Emotional Disorders and Survival of Nazi Persecution." In H. Krystal (Ed.), *Massive Psychic Trauma*. New York: International Universities Press, 1968.
- Nevin, D. "Whitman, Charlie: The Eagle Scout Who Grew Up with a Tortured Mind." *Life*, 1966, 11, 28-31.
- Nicol, A. R., Gunn, J. C., Gristwood, J., Foggitt, R. H., and Watson, J. P. "The Relationship of Alcoholism to Violent Behavior Resulting in Long-Term Imprisonment." *British Journal of Psychiatry*, 1973, 123, 47-51.
- Notman, M., and Nadelson, C. "The Rape Victim: Psychodynamic Considerations." *American Journal of Psychiatry*, 1976, 133, 408-412.
- Noyes, A. P., and Kolb, L. C. *Noyes' Modern Clinical Psychiatry*. Philadelphia: Saunders, 1968.
- Oakes, M. "Pills, Periods, and Personality." Unpublished doctoral dissertation, University of Michigan, 1971.
- O'Brien, J. "Violence in Divorce-Prone Families." *Journal of Marriage and the Family*, 1971, 33, 692-698.

- O'Connell, B. A. "Matricide." *Lancet*, 1963, 1, 1083-1084.
- O'Leary, J. L., and Goldring, S. *Science and Epilepsy: Neuroscience Gains in Epilepsy Research*. New York: Raven Press, 1976.
- Ogden, C. K., and Richards, I. A. *The Meaning of Meaning*. New York: Harcourt Brace Jovanovich, 1930.
- Oliver, J. "Five Generations of Ill-Treated Children in One Family Pedigree." *British Journal of Psychiatry*, 1971, 119, 473-480.
- Orenstein, L., and Weisstein, A. "Temporary Insanity as a Defense." *American Journal of Psychiatry*, 1958, 115, 121-125.
- Ounsted, C., Lindsay, J., and Norman, R. *Biological Factors in Temporal Lobe Epilepsy*. London: Heinemann Medical Books, 1966.
- Ounsted, C., Oppenheimer, R., and Lindsay, J. "Aspects of Bonding Failure: The Psychopathology and Psychotherapeutic Treatment of Families of Battered Children." *Developmental Medicine and Child Neurology*, 1975, 16, 447-456.
- Pacht, A. R. "The Rapist in Treatment: Professional Myths and Psychological Realities." Paper presented at 6th Alabama Symposium on Justice and Behavioral Sciences, University of Alabama, Tuscaloosa, 1975.
- Pacht, A. R., Halleck, S., and Ehrmann, J. C. "Diagnosis and Treatment of the Sexual Offender: A Nine-Year Study." *American Journal of Psychiatry*, 1962a, 118, 802-808.
- Pacht, A. R., Halleck, S., and Ehrmann, J. C. "Psychiatric Treatment of the Sex Offender." In J. H. Masserman (Ed.), *Current Psychiatric Therapies*. Vol. 2. New York: Grune & Stratton, 1962b.
- Packer, H. L. *The Limits of the Criminal Sanction*. Stanford, Calif.: Stanford University Press, 1968.
- Paillas, J. E. "Aspects Cliniques de l'Épilepsie Temporale." In M. Baldwin and P. Bailey (Eds.), *Temporal Lobe Epilepsy*. Springfield, Ill.: Thomas, 1958.
- Panton, J. "Personality Differences Between Male and Female Prison Inmates Measured by the MMPI." *Criminal Justice and Behavior*, 1974, 1 (4), 332-340.
- Papez, J. W. "A Proposed Mechanism of Emotion." *Archives of Neurology and Psychiatry*, 1937, 38, 725-743.
- Paredes, A. "The History of the Concept of Alcoholism." In R. E. Tarter and A. A. Sugerman (Eds.), *Alcoholism: Interdisciplinary Approaches to an Enduring Problem*. Reading, Mass.: Addison-Wesley, 1976.

- Parke, R. D., Berkowitz, L., Leyens, J., West, S., and Sebastian, R. "The Effects of Repeated Exposure to Movie Violence on Aggressive Behavior in Juvenile Delinquent Boys: A Field Experimental Approach." In L. Berkowitz (Ed.), *Advances in Experimental Social Psychology*. Vol. 8. New York: Academic Press, 1975.
- Parke, R. D., and Collmer, C. W. "Child Abuse: An Interdisciplinary Analysis." In E. M. Hetherington (Ed.), *Review of Child Development Research*. Vol. 5. Chicago: University of Chicago Press, 1975.
- Parsons, T. "Age and Sex in the Social Structure of the United States." In S. N. Eisenstadt (Ed.), *From Generation to Generation*. New York: Free Press, 1956.
- Pastore, N. "The Role of Arbitrariness in the Frustration-Aggression Hypothesis." *Journal of Abnormal and Social Psychology*, 1952, 47, 728-731.
- Patterson, A. H. "Hostility Catharsis: A Naturalistic Quasi-Experiment." Paper presented at the American Psychological Association Convention, 1974.
- Patterson, G. R., Littman, R. A., and Bricker, W. "Assertive Behavior in Children: A Step Toward a Theory of Aggression." *Monographs of the Society for Research in Child Development*, 1967, 32 (5).
- Pavlov, I. P. *Lectures on Conditioned Reflexes*. New York: Liveright, 1928.
- Penfield, W., and Jasper, H. *Epilepsy and the Functional Anatomy of the Human Brain*. Boston: Little, Brown, 1954.
- People v. Francabandera*. 354 New York Supp. 2nd 609 (Court of Appeals, 1974).
- Pepitone, A., and Reichland, G. "Group Cohesiveness and the Expression of Hostility." *Human Relations*, 1955, 8, 327-337.
- Perdue, W. C., and Lester, D. "Those Who Murder Kin: A Rorschach Study." *Perceptual and Motor Skills*, 1973, 36, 606.
- Perlin, M. "Psychiatric Testimony in a Criminal Setting." *Bulletin of the Academy of Psychiatry and Law*, 1975, 3, 143-148.
- Pernanen, K. "Alcohol and Crimes of Violence." In B. Kissin and H. Begleiter (Eds.), *The Biology of Alcoholism*. Vol. 4: *Social Aspects of Alcoholism*. New York: Plenum, 1976.
- Peters, J. J., Pedigo, J. M., Steg, J., and McKenna, J. J. "Group Psychotherapy of the Sex Offender." *Federal Probation*, 1968, 32, 41-45.

- Peters, J. J., and Resnik, H. L. P. "Probationed Pedophiles: Treatment Results with Out-Patient Group Psychotherapy." In *International Congress Series No. 150*. (Proceedings of the 4th World Congress of Psychiatry, Madrid, Sept. 1966.) Amsterdam: Excerpta Medica, 1967.
- Peters, J. J., and Roether, H. A. "Group Psychotherapy for Probationed Sex Offenders." In H. L. P. Resnik and M. E. Wolfgang (Eds.), *Sexual Behavior: Social, Clinical, and Legal Aspects*. Boston: Little, Brown, 1972.
- Peters, J. J., and Sadoff, R. "Psychiatric Services for Sex Offenders on Probation." *Federal Probation*, 1971, 35, 33-37.
- Peters, R. S. "Moral Education and the Psychology of Character." *Philosophy*, April 1962.
- Peterson, R. A. "Aggression Level as a Function of Expected Retaliation and Aggression Level of Target and Aggressor." *Developmental Psychology*, 1971, 5, 161-166.
- Piliavin, I., Hardyck, J., and Vadum, A. "Reactions to the Victim in a Just or Non-Just World." Paper presented at meeting of the Society of Experimental Social Psychology, Bethesda, Md., August 1967.
- Pittel, S. M., and Hofer, R. "In Transition to Amphetamine Abuse." In D. E. Smith and D. R. Wesson (Eds.), *Uppers and Downers*. Englewood Cliffs, N.J.: Prentice-Hall, 1972.
- Plotnik, R., and Delgado, J. M. R. "Aggression and Pain in Restrained Rhesus Monkeys." In B. E. Eleftheriou and J. P. Scott (Eds.), *The Physiology of Aggression and Defeat*. New York: Plenum, 1971.
- Podolsky, E. "The Paranoid Murderer." *Journal of Forensic Medicine*, 1956, 3, 149-151.
- Podolsky, E. "Jealousy as Motive to Homicide." *Diseases of the Nervous System*, 1961, 22, 437-442.
- Podolsky, E. "Somnambulistic Homicide." *American Journal of Psychiatry*, 1964, 121, 191-192.
- Pollak, O. *The Criminality of Women*. Philadelphia: University of Pennsylvania Press, 1950.
- Polsky, S. "Expert Testimony: Problems in Jurisprudence." *Temple Law Quarterly*, 1961, 34, 357-367.
- Powell, D. A., and Creer, T. L. "Interaction of Developmental and Environmental Variables in Shock-Elicited Aggression." *Journal of Comparative and Physiological Psychology*, 1969, 69, 219-225.
- Powers, P. C., and Geen, R. G. "Effects of the Behavior and the Perceived Arousal of a Model on Instrumental Aggression."

- Journal of Personality and Social Psychology*, 1972, 23, 175-183.
- Preble, E., and Casey, J. J., Jr. "Taking Care of Business: The Heroin User's Life on the Street." *International Journal of Addictions*, 1969, 4, 1-24.
- Prescott, J. W. "Body Pleasure and the Origins of Violence." *Bulletin of the Atomic Scientists*, Nov. 1975, pp. 10-20.
- President's Commission on Law Enforcement and Administration of Justice. Task force report. *Crime and Its Impact*. Washington, D.C.: U.S. Government Printing Office, 1967.
- Pytkowicz, A. R., Wagner, N., and Sarason, I. G. "An Experimental Study of the Reduction of Hostility Through Fantasy." *Journal of Personality and Social Psychology*, 1967, 5, 295-304.
- Rada, R. T. "Alcoholism and Forcible Rape." *American Journal of Psychiatry*, 1975, 132, 444-446.
- Radbill, S. X. "A History of Child Abuse and Infanticide." In R. E. Helfer and C. H. Kempe (Eds.), *The Battered Child*. Chicago: University of Chicago Press, 1968.
- Radzinowicz, L. *Sexual Offenses*. London: Macmillan, 1957.
- Rank, O. *Will Therapy: Truth and Reality*. New York: Knopf, 1945.
- Ransford, H. "Isolation, Powerlessness, and Violence." *American Journal of Sociology*, 1968, 73 (5), 581-591.
- Rasch, W. "Homicide and Intimacy." Paper presented at Symposium on Murder Within the Family, American Psychological Association convention, Washington, D.C., Sept. 1-5, 1967.
- Rascovsky, A., and Rascovsky, M. "On the Genesis of Acting Out and Psychopathic Behaviour in Sophocles' Oedipus: Notes on Filicide." *International Journal of Psychoanalysis*, 1968, 49, 390-394.
- Rawick, G. P. *The American Slave: A Composite Autobiography*. Vol. 1. Westport, Conn.: Greenwood, 1972.
- Reeves, A. G., and Plum, F. "Hyperphagia, Rage, and Dementia Accompanying a Ventromedial Hypothalamic Neoplasm." *Archives of Neurology*, 1969, 20, 616-624.
- Reich, C. *The Greening of America: The Coming of a New Generation*. New York: Random House, 1970.
- Reich, P., and Hepps, R. B. "Homicide During a Psychosis Induced by LSD." *Journal of the American Medical Association*, 1972, 219, 869-871.
- Reich, R. "Care of the Chronically Mentally Ill: A National

- Disgrace." *American Journal of Psychiatry*, 1973, 130, 911-912.
- Reich, W. "The Masochistic Character." In W. Reich, *Character Analysis*. New York: Orgone Institute Press, 1945.
- Reinhart, J. M. *Sex Perversions and Sex Crimes*. Springfield, Ill.: Thomas, 1957.
- Resnik, H. L. P., and Peters, J. J. "Group Psychotherapy with Sexual Offenders." In J. H. Masserman (Ed.), *Current Psychiatric Therapies*. Vol. 8. New York: Grune & Stratton, 1968.
- Resnick, P. J. "Child Murder by Parents: A Psychiatric Review of Filicide." *American Journal of Psychiatry*, 1969, 126, 325-334.
- Resnick, P. J. "Murder of the Newborn: A Psychiatric Review of Neonaticide." *American Journal of Psychiatry*, 1970, 126, 1414-1420.
- Revitch, E. "Sex Murder and Sex Aggression." *Journal of the Medical Society of New Jersey*, 1957, 54, 519-523.
- Revitch, E. "Paroxysmal Manifestations of Non-Epileptic Origin: Catathymic Attacks." *Diseases of the Nervous System*, 1964, 25, 662-669.
- Revitch, E. "Sex Murder and the Potential Sex Murderer." *Diseases of the Nervous System*, 1965, 26, 640-648.
- Revitch, E. "Psychiatric Evaluation and Classification of Antisocial Activities." *Diseases of the Nervous System*, 1975, 36, 419-421.
- Revitch, E. "Classification of Offenders for Prognostic and Dispositional Evaluation." *Bulletin of the Academy of Law and Psychiatry*, 1977, 5, 1-11.
- Richardson, L. F. "Generalized Foreign Policy." *British Journal of Psychology Monograph Supplement*, 1939, no. 23.
- Ridpath, J. C. *The Life and Trial of Guiteau, the Assassin*. Cincinnati: Jones Brothers, 1886.
- Riegel, K. "The Dialectic of Human Development." *American Psychologist*, Oct. 1976, pp. 689-700.
- Robey, A. "Criteria for Competency to Stand Trial: A Check List for Psychiatrists." *American Journal of Psychiatry*, 1965, 122, 616-620.
- Robitscher, J. *Pursuit of Agreement: Psychiatry and the Law*. Philadelphia: Lippincott, 1966.
- Rodin, E. A. "Psychomotor Epilepsy and Aggressive Behavior." *Archives of General Psychiatry*, 1973, 28, 210-213.
- Rodin, E. A. "Differences Between Patients with Temporal



- Lobe Seizures and Those with Other Forms of Epileptic Attacks." *Epilepsia*, 1976, 17, 313-320.
- Rodin, E. A. "Psychosocial Management of Patients with Seizure Disorders." *McLean Hospital Journal*, Special Issue, June 1977, pp. 74-84.
- Roebuck, J., and Johnson, R. "The Negro Drinker and Assaulter as a Criminal Type." *Crime and Delinquency*, 1962, 8, 21-33.
- Roger, A., and Dongier, S. "Corrélations Électrocliniques Chez 50 Épileptiques Internés." *Revue Neurologique* (Paris), 1950, 83, 593-596.
- Rogers, C. *Client Centered Therapy*. Boston: Houghton Mifflin, 1951.
- Roheim, G. *Psychoanalysis and Anthropology*. New York: International Universities Press, 1970.
- Rosekrans, M. A., and Hartup, W. W. "Imitative Influences of Consistent and Inconsistent Response Consequences to a Model and Aggressive Behavior in Children." *Journal of Personality and Social Psychology*, 1967, 7, 429-434.
- Rosenblatt, E., and Greenland, C. "Female Crimes of Violence." *Canadian Journal of Criminology and Corrections*, 1974, 16 (2), 173-180.
- Rosenhan, D. L. "On Being Sane in Insane Places." *Science*, 1973, 179, 250-258.
- Ross, A. "Some Philosophical Considerations of the Legal-Psychiatric Debate of Criminal Responsibility." *Issues in Criminology*, 1965, 1, 34-36.
- Rosvold, H. E., Mirsky, A. F., and Pribram, K. H. "Influence of Amygdalectomy on Social Behavior in Monkeys." *Journal of Comparative Physiology and Psychology*, 1954, 47, 173-178.
- Roszak, T. *The Making of a Counter Culture*. New York: Doubleday, 1969.
- Roth, M. "Psychiatry and Its Critics." *British Journal of Psychiatry*, 1973, 122, 373-378.
- Rothaus, P., and Worchel, P. "Ego-Support Communication, Catharsis, and Hostility." *Journal of Personality*, 1964, 32, 296-312.
- Rothman, L. M., Sher, J., Quencer, R. M., and Tenner, M. S. "Intracranial Ectopic Pituitary Adenoma: Case Report." *Journal of Neurosurgery*, 1976, 44, 96-99.
- Rubin, B. "Predictions of Dangerousness in Mentally Ill." *Archives of General Psychiatry*, 1972, 27, 397-407.
- Rule, B. G., and Percival, E. "The Effects of Frustration and At-

- tack on Physical Aggression." *Journal of Experimental Research in Personality*, 1971, 5, 111-118.
- Ruotolo, A. "Dynamics of Sudden Murder." *American Journal of Psychoanalysis*, 1968, 28, 162-178.
- Ruotolo, A. "Neurotic Pride and Homicide." *American Journal of Psychoanalysis*, 1975, 35, 1-16.
- Russell, D. H. "A Study of Juvenile Murderers." *Journal of Offender Therapy*, 1965, 9, 55-86.
- Sabini, J., and Silver, M. "Moral Reproach: Inhibition, Embarrassment, and Gossip." Unpublished manuscript, 1977.
- Sadoff, R. L. "Psychiatric Involvement in the Search for Truth." *American Bar Association Journal*, 1966, 32, 251-255.
- Sadoff, R. L. "Clinical Observations on Parricide." *Psychiatric Quarterly*, 1971, 45, 65-69.
- Sadoff, R. L. *Forensic Psychiatry: A Practical Guide for Lawyers and Psychiatrists*. Springfield, Ill.: Thomas, 1975.
- Samuels, W. *Contemporary Social Psychology: An Introduction*. Englewood Cliffs, N.J.: Prentice-Hall, 1975.
- Sano, K., Mayanagi, Y., Sekino, H., Ogashiwa, M., and Ishijima, B. "Results of Stimulation and Destruction of the Posterior Hypothalamus in Man." *Journal of Neurosurgery*, 1970, 33, 689-707.
- Sargent, D. "Children Who Kill: A Family Conspiracy?" *Social Work*, 1962, 7, 35-42.
- Satten, J., Menninger, K. A., and Mayman, M. "Murder Without Apparent Motive: A Study in Personality Disorganization." *American Journal of Psychiatry*, 1960, 117, 48-53.
- Sawa, M., Veki, Y., Arita, M., and Harada, T. "Preliminary Report on Amygdaloidectomy on Psychotic Patients." *Folia Psychiatrica et Neurologica Japan*, 1954, 7, 309-329.
- Sayed, Z., Lewis, S., and Brittain, R. "An Electroencephalographic and Psychiatric Study of Thirty-Two Insane Murderers." *British Journal of Psychiatry*, 1969, 111, 1115-1124.
- Schachter, S., and Singer, J. "Cognitive, Social and Physiological Determinants of Emotional State." *Psychological Review*, 1962, 69 (5), 379-399.
- Schaller, G. B. *The Mountain Gorilla: Ecology and Behavior*. Chicago: University of Chicago Press, 1963.
- Schaller, G. B. *The Serengeti Lion: A Study of Predator-Prey Relations*. Chicago: University of Chicago Press, 1972.
- Schein, E. H. "Brainwashing." In W. G. Bennis, E. H. Schein,

- and F. I. Steel (Eds.), *Interpersonal Dynamics*. Homewood, Ill.: Dorsey Press, 1946.
- Scherer, K. R., Abeles, R. P., and Fischer, C. S. *Human Aggression and Conflict: Interdisciplinary Perspectives*. Englewood Cliffs, N.J.: Prentice-Hall, 1975.
- Scherl, D. J., and Mack, J. E. "A Study of Adolescent Matricide." *Journal of the American Academy of Child Psychiatry*, 1966, 5, 569-593.
- Schiffer, M. "The Sentencing of Mentally Disordered Offenders." *Osgood Hall Law Journal*, 1976, 14, 307-315.
- Schlossberg, H. *Psychologist with a Gun*. New York: Coward, McCann & Geoghegan, 1974.
- Schneck, J. "Pseudomalingering and Leonid Andreyev's 'The Dilemma.'" *Psychiatric Quarterly*, 1970, 44, 49-54.
- Schoenfeld, C. *Psychoanalysis and the Law*. Springfield, Ill.: Thomas, 1973.
- School Stoppers Textbook: Handbook for School Disruption and Violence*. Reprinted by the Committee on the Judiciary. Washington, D.C.: U.S. Government Printing Office, 1976.
- Schrag, P., and Divoky, D. *The Myth of the Hyperactive Child and Other Means of Child Control*. New York: Pantheon, 1975.
- Schuster, R. H. "Lekking Behavior in Kafue Lechwe." *Science*, 1976a, 192, 1240-1242.
- Schuster, R. H. "Reproductive Social Organization of Kafue Lechwe: Implications for Management and Survival." Paper presented at the 4th Regional Wildlife Conference for East and Central Africa, Lusaka, Zambia, 1976b.
- Schwade, E. D., and Geiger, S. G. "Matricide with Electroencephalographic Evidence of Thalamic and Hypothalamic Disorder." *Diseases of the Nervous System*, 1953, 14, 18-20.
- Schwade, E. D., and Otto, O. "Homicide as a Manifestation of Thalamic or Hypothalamic Disorder with Abnormal Electroencephalographic Findings." *Wisconsin Medical Journal*, 1953, 52, 171-174.
- Scott, J. P. "Hostility and Aggression." In B. B. Wolman (Ed.), *Handbook of General Psychology*. Englewood Cliffs, N.J.: Prentice-Hall, 1973.
- Scott, J. P., and Marston, M. V. "Nonadaptive Behavior Resulting from a Series of Defeats in Fighting Mice." *Journal of Abnormal and Social Psychology*, 1953, 48, 417-428.
- Sears, D. O., and McConahay, J. B. "Participation in the Los Angeles Riot." *Social Problems*, 1969, 17, 3-20.

- Sears, R. R., Maccoby, E. E., and Levin, H. *Patterns of Child Rearing*. New York: Harper & Row, 1957.
- Sedgwick, P. "Illness: Mental and Otherwise." *Hastings Center Studies* (Institute of Society, Ethics and the Life Sciences), 1973, 3, 19-40.
- Seligman, M. E. P., and Hager, J. *Biological Boundaries of Learning*. New York: Appleton-Century-Crofts, 1972.
- Sellin, T. *Culture Conflict and Crime*. New York: Social Science Research Council, 1938.
- Sennett, R., and Cobb, J. *The Hidden Injuries of Class*. New York: Random House, 1972.
- Serafetinides, E. A. "Aggressiveness in Temporal Lobe Epileptics and Its Relation to Cerebral Dysfunction and Environmental Factors." *Epilepsia*, 1965, 6, 33-42.
- Serber, M. "Shame Aversion Therapy." *Behavior Therapy and Experimental Psychiatry*, 1970, 1, 219-221.
- Serber, M. "Shame Aversion Therapy With and Without Heterosexual Retraining." In R. D. Rubin, J. P. Brady, and J. D. Henderson (Eds.), *Advances in Behavior Therapy*. Vol. 4. New York: Academic Press, 1973.
- Serber, M., and Keith, C. G. "The Atascadero Project: Model of a Sexual Retraining Program for Incarcerated Homosexual Pedophiles." *Journal of Homosexuality*, 1974, 1, 87-97.
- Serber, M., and Wolpe, J. "Behavior Therapy Techniques." In H. L. P. Resnick and M. E. Wolfgang (Eds.), *Sexual Behavior: Social, Clinical, and Legal Aspects*. Boston: Little, Brown, 1972.
- Shadoan, G. "Raising the Insanity Defense: The Practical Side." *American Criminal Law Review*, 1972, 10, 533-549.
- Shah, S. A. "Dangerousness and Considerations of Social Policy." Paper presented at annual meeting of American Psychiatric Association, Detroit, Michigan, 1974.
- Sheard, M. "Lithium in the Treatment of Aggression." *Journal of Nervous and Mental Disease*, 1975, 160, 108-118.
- Shearer, L. "The Assassins." *Parade*, Oct. 12, 1975, pp. 5-7.
- Short, J. F. (Ed.). *Gang Delinquency and Delinquent Subcultures*. New York: Harper & Row, 1968.
- Short, J. F. "The National Commission on the Causes and Prevention of Violence: Reflections on the Contributions of Sociology and Sociologists." In M. Komarovsky (Ed.), *Sociology and Public Policy: The Case of Presidential Commissions*. New York: Elsevier, 1975.
- Shuntich, R. J., and Taylor, S. P. "The Effects of Alcohol on

- Human Physical Aggression." *Journal of Experimental Research in Personality*, 1972, 6, 34-38.
- Shupe, L. M. "Alcohol and Crime: A Study of the Urine Alcohol Concentration Found in 882 Persons Arrested During or Immediately After the Commission of a Felony." *Journal of Criminal Law and Criminology*, 1954, 44, 661-664.
- Siegfried, J., and Ben-Shmuel, A. "Long-Term Assessment of Stereotactic Amygdalotomy for Aggressive Behavior." In L. V. Laitinen and K. E. Livingston (Eds.), *Surgical Approaches in Psychiatry*. Baltimore: University Park Press, 1973.
- Sigal, J. J., Silver, D., Rakoff, V., and Ellin, B. "Some Second-Generation Effects of Survival of the Nazi Persecution." *American Journal of Orthopsychiatry*, 1973, 43, 320-327.
- Silver, L. B., Dublin, C. C., and Lourie, R. S. "Does Violence Breed Violence? Contributions from a Study of the Child Abuse Syndrome." *American Journal of Psychiatry*, 1969, 126, 404-407.
- Silverman, D. "Clinical and EEG Studies on Criminal Psychopaths." *Archives of Neurology and Psychiatry*, 1943, 50, 18-33.
- Silverman, D. "EEG of Criminals." *Archives of Neurology and Psychiatry*, 1944, 52, 38-42.
- Simon, R. *The Jury and the Defense of Insanity*. Boston: Little, Brown, 1967.
- Singer, D. L. "Aggression Arousal, Hostile Humor, Catharsis." *Journal of Personality and Social Psychology Monograph Supplement*, 1968, 8 (Part 2), 1-14.
- Singer, J. D., and Small, M. *The Wages of War, 1816-1965: A Statistical Handbook*. New York: Wiley, 1972.
- Singer, J. L. *The Control of Aggression and Violence: Cognitive and Physiological Factors*. New York: Academic Press, 1971.
- Skolnick, J. H., and Gray, T. C. *Police in America*. Boston: Little, Brown, 1975.
- Slater, E., Beard, A. W., and Glithero, E. "The Schizophrenia-Like Psychoses of Epilepsy." *British Journal of Psychiatry*, 1963, 109, 95-150.
- Slatter, P. *Microcosm: Structural, Psychological, and Religious Evaluation in Groups*. New York: Wiley, 1966.
- Smart, R. G., and Bateman, K. "Unfavorable Reactions to LSD: A Review and Analysis of the Available Case Reports." *Canadian Medical Association Journal*, 1967, 97, 1214-1221.
- Smelser, N. J. *Theory of Collective Behavior*. New York: Free Press, 1962.

- Smith, B. "The Polygraph." *Scientific American*, 1967, 216, 25-31.
- Smith, D. E. "Analysis of Variables in High Dose Methamphetamine Dependence." *Journal of Psychedelic Drugs*, 1969, 2, 132-137.
- Smith, G. W. "The Value of Life." *Crime and Delinquency*, July 1977, pp. 253-259.
- Smith, J. *Development of Legal Institutions*. Racine, Wisc.: Western, 1965.
- Smith, S. M., Hanson, R., and Noble, S. "Parents of Battered Children: A Controlled Study." In A. W. Franklin (Ed.), *Concerning Child Abuse*. London: Churchill Livingstone, 1975.
- Smith, S. M., Honigsberger, L., and Smith, C. A. "EEG and Personality Factors in Child Batterers." In A. W. Franklin (Ed.), *Concerning Child Abuse*. London: Churchill Livingstone, 1975.
- Snow, C. P. "Either-Or." *Progressive*, 1961, 25 (2), 24-25.
- Sorel, G. *Reflections on Violence*. (T. E. Hulme and J. Roth, Trans.) New York: Free Press, 1950.
- Sparrow, G. *Women Who Murder*. London: Abelard-Schuman, 1970.
- Spence, D. P. (Ed.). *The Broad Scope of Psychoanalysis: Selected Papers of Leopold Bellak*. New York: Grune & Stratton, 1967.
- Spiegel, J. P. "Psychosocial Factors in Riots—Old and New." *American Journal of Psychiatry*, 1968, 125, 281-285.
- Spinetta, J., and Rigler, D. "The Child-Abusing Parent: A Psychological Review." *Psychological Bulletin*, 1972, 77, 296-304.
- Spitz, R. "Hospitalism: An Inquiry into the Genesis of Psychiatric Conditions in Early Childhood." *Psychoanalytic Study of the Child*, 1945, 1, 53-74.
- Staples, F. R., and Walters, R. H. "Influence of Positive Reinforcement of Aggression on Subjects Differing in Initial Aggression Level." *Journal of Consulting Psychology*, 1964, 28, 547-552.
- State v. Kociolek*. 23 New Jersey 400, 129 A.2d 417 (1957).
- State v. McDavitt*. 62 New Jersey 36, 297 A.2d 849 (1972).
- State v. Melvin*. 65 New Jersey 1, 16-20, 319 A.2d 450 (1974).
- Steele, B. F. "Parental Abuse of Infants and Small Children." In E. J. Anthony and T. Benedek (Eds.), *Parenthood: Its Psychology and Psychopathology*. Boston: Little, Brown, 1970a.
- Steele, B. F. "Violence in Our Society." *The Pharos of Alpha Omega Alpha*, 1970b, 33, 42-48.

- Steele, B. F. "Violence Within the Family." In R. E. Helfer and C. H. Kempe (Eds.), *Child Abuse and Neglect: The Family and the Community*. Cambridge, Mass.: Ballinger, 1976.
- Steele, B. F., and Pollock, C. B. "A Psychiatric Study of Parents Who Abuse Infants and Small Children." In R. E. Helfer and C. H. Kempe (Eds.), *The Battered Child*. Chicago: University of Chicago Press, 1968.
- Steinmetz, S. K., and Straus, M. A. "The Family as Cradle of Violence." *Society*, 1973, 10, 50-58.
- Steinmetz, S. K., and Straus, M. A. (Eds.). *Violence in the Family*. New York: Dodd, Mead, 1975.
- Stephan, C. "Sex Prejudice in Jury Stimulation." *Journal of Psychology*, 1974, 88, 305-312.
- Stephens, J. H., and Shaffer, J. W. "A Controlled Replication of the Effectiveness of Diphenylhydantoin in Reducing Irritability and Anxiety in Selected Neurotic Outpatients." *Journal of Clinical Pharmacology*, 1973, 13, 351-356.
- Steuer, F. B., Applefield, J. M., and Smith, R. "Televised Aggression and the Interpersonal Aggression of Preschool Children." *Journal of Experimental Child Psychology*, 1971, 11, 442-447.
- Stevens, J. R. "Psychiatric Implications of Psychomotor Epilepsy." *Archives of General Psychiatry*, 1966, 14, 461-471.
- Stevens, J. R., Mark, V. H., Ervin, F. R., Pacheco, P., and Suetmatsu, K. "Deep Temporal Stimulation in Man: Long Latency, Long Lasting Psychological Changes." *Archives of Neurology*, 1969, 21, 157-169.
- Stevens, S. S. "Mathematics, Measurement, and Psychophysics." In S. S. Stevens (Ed.), *Handbook of Experimental Psychology*. New York: Wiley, 1951.
- Stewart, O. C. "Lorenz/Margolin on the Ute." In A. Montagu (Ed.), *Man and Aggression*. (2nd ed.) London: Oxford University Press, 1973.
- Stinchcomb, A. L. *Rebellion in a High School*. New York: Quadrangle, 1964.
- Stollar, R. J. "The Bedrock of Masculinity and Femininity: Bisexuality." *Archives of General Psychiatry*, 1972, 26, 207-212.
- Stollar, R. J. "Facts and Fancies: An Examination of Freud's Concept of Bisexuality." In J. Strouse (Ed.), *Women and Analysis*. New York: Grossman, 1974.
- Stone, A. *Mental Health and the Law: A System in Transition*. Rockville, Md.: National Institute of Mental Health, 1975.

- Stouffer, S. A., Suchman, E. A., DeVinney, L. C., Stars, S. A., and Williams, R. M., Jr. *The American Soldier: Adjustment During Army Life*. Vol. 1. Princeton, N.J.: Princeton University Press, 1949.
- Straus, M. A. "Leveling, Civility, and Violence in the Family." *Journal of Marriage and the Family*, 1974, 38, 13-29.
- Stricker, G. "Implications of Research for Psychotherapeutic Treatment of Women." *American Psychologist*, 1977, 32, 14-22.
- Strickland, L. H., Jones, E. E., and Smith, W. P. "Effects of Group Support and the Evaluation of an Antagonist." *Journal of Abnormal and Social Psychology*, 1960, 61, 73-81.
- Stürup, G. K. "Treatment of Sexual Offenders in Herstedvester, Denmark." *Acta Psychiatrica Scandinavica*, 1968, 44, Supplement 204.
- Stykes, G. M., and Matza, D. "Techniques of Neutralization: A Theory of Delinquency." *American Sociological Review*, 1957, 22, 664-670.
- Sullivan, H. S. *Interpersonal Theory of Psychiatry*. New York: Norton, 1953.
- Sullivan, R. F. "The Economics of Crime: An Introduction to the Literature." *Crime and Delinquency*, April 1973, pp. 138-150.
- Sutherland, E. H. *Principles of Criminology*. Philadelphia: Lippincott, 1947.
- Sutherland, E. H., and Cressey, D. *Criminology*. Philadelphia: Lippincott, 1974.
- Sutker, M., and Moan, C. "A Psychosocial Description of Penitentiary Inmates." *Archives of General Psychiatry*, 1973, 29 (5), 663-667.
- Svalastoga, K. "Rape and Social Structure." *Pacific Sociological Review*, 1962, 5, 48-65.
- Sweet, W. H., Ervin, F. R., and Mark, V. H. "The Relationship of Violent Behaviour to Focal Cerebral Disease." In S. Garattini and E. B. Sigg (Eds.), *Aggressive Behaviour*. Amsterdam: Excerpta Medica, 1969.
- Szasz, T. *The Myth of Mental Illness*. New York: Harper & Row, 1961.
- Szasz, T. *Law, Liberty and Psychiatry*. New York: Macmillan, 1963.
- Szasz, T. *The Ethics of Psychoanalysis*. New York: Basic Books, 1965.
- Szasz, T. *The Manufacture of Madness*. New York: Harper & Row, 1970.



- Takala, M., Pihkanen, J. A., and Markanen, R. *The Effects of Distilled and Brewed Beverages: A Physiological, Neurological and Psychological Study*. Helsinki: Finnish Foundation for Alcohol Studies, 1957.
- Tamerin, J., and Mendelson, J. H. "The Psychodynamics of Chronic Inebriation: Observations of Alcoholics During the Process of Drinking in an Experimental Group Setting." *American Journal of Psychiatry*, 1969, 125, 886-899.
- Tanay, E. "Psychiatric Study of Homicide." *American Journal of Psychiatry*, 1969, 125, 1252-1258.
- Tanay, E. "Psychiatric Aspects of Homicide Prevention." *American Journal of Psychiatry*, 1972, 128, 815-818.
- Tanay, E. "Adolescents Who Kill Parents: Reactive Parricide." *Australian and New Zealand Journal of Psychiatry*, 1973, 7, 263-277.
- Tanay, E. "Dangerousness and Psychiatry." *Current Concepts in Psychiatry*, 1975, 1, 17-26.
- Tannenbaum, F. *Crime and the Community*. Boston: Ginn, 1938.
- Tannenbaum, P. H. "Studies in Film- and Television-Mediated Arousal and Aggression: A Progress Report." In G. A. Comstock, E. A. Rubinstein, and J. P. Murray (Eds.), *Television and Social Behavior*. Vol. 5: *Television Effects: Further Explorations*. Washington, D.C.: U.S. Government Printing Office, 1972.
- Taylor, S. P., and Gammon, C. B. "Effects of Type and Dose of Alcohol on Human Physical Aggression." *Journal of Personality and Social Psychology*, 1975, 32, 169-175.
- Thelen, M. H., and Soltz, W. "The Effect of Vicarious Reinforcement on Imitation in Two Social Racial Groups." *Child Development*, 1969, 40, 879-887.
- Thompson, C. *Psychoanalysis: Evolution and Development*. New York: Norton, 1950.
- Thrasher, F. M. *The Gang*. Chicago: University of Chicago Press, 1963.
- Tietlebaum, M. S. (Ed.). *Sex Differences*. New York: Doubleday, 1976.
- Tinbergen, N. *The Study of Instinct*. Oxford, England: Clarendon Press, 1951.
- Tinbergen, N. "On War and Peace in Animals and Man." *Science*, 1968, 160, 1411-1418.
- Tinklenberg, J. R. "Alcohol and Violence." In P. G. Bourne and R. Fox (Eds.), *Alcoholism: Progress in Research and Treatment*. New York: Academic Press, 1973.

- Tinklenberg, J. R., Murphy, P. L., Darley, C. F., and Kopell, B. S. "Drug Involvement in Criminal Assaults by Adolescents." *Archives of General Psychiatry*, 1974, 30, 685-689.
- Tinklenberg, J. R., and Stillman, R. C. "Drug Use and Violence." In D. N. Daniels, M. F. Gilula, and F. M. Ochberg (Eds.), *Violence and the Struggle for Existence*. Boston: Little, Brown, 1970.
- Tittle, C. R., and Logan, C. H. "Sanctions and Deviance: Evidence and Remaining Questions." *Law and Society Review*, 1973, 7 (3), 371-392.
- Toch, H. *Violent Men: An Inquiry into the Psychology of Violence*. Chicago: Aldine, 1969.
- Toch, H., Grant, J. D., and Galvin, R. T. *Agents of Change: A Study in Police Reform*. New York: Wiley, 1975.
- Tooley, K. "The Small Assassins: Clinical Notes on a Subgroup of Murderous Children." *Journal of the American Academy of Child Psychiatry*, 1975, 14, 306-318.
- Tripp, C. A. *Who Is a Homosexual?* New York: Mattachine, 1965.
- Tuke, D. M. "The McNaughten Rule." In C. E. Goshen (Ed.), *Documentary History of Psychiatry*. New York: Philosophical Library, 1967.
- Turiel, E., and Rothman, G. R. "The Influence of Reasoning on Behavioral Choices at Different Stages of Moral Development." *Child Development*, 1972, 43, 741-756.
- Turnbull, C. M. *The Forest People*. New York: Simon & Schuster, 1961.
- Turner, C. W., and Simons, L. S. "Effects of Subject Sophistication and Evaluation Apprehension on Aggressive Responses to Weapons." *Journal of Personality and Social Psychology*, 1974, 30, 341-348.
- Turner, E. "A New Approach to Unilateral and Bilateral Lobotomies for Psychomotor Epilepsy." *Journal of Neurology, Neurosurgery, and Psychiatry*, 1963, 26, 285-299.
- Tuteur, W., and Glotzer, J. "Further Observations on Murdering Mothers." *Journal of Forensic Sciences*, 1966, 11, 373-383.
- Uehling, H. F. "Group Therapy Turns Repression into Expression for Prison Inmates." *Federal Probation*, 1962, 26, 43-49.
- Ulrich, R. E. "Pain as a Cause of Aggression." *American Zoologist*, 1966, 6, 643-662.
- Ulrich, R. E., and Azrin, N. H. "Reflexive Fighting in Response to Aversive Stimulation." *Journal of Experimental Analysis of Behavior*, 1962, 5, 511-520.
- Ulrich, R. E., Johnston, M., Richardson, J., and Wolff, P. "The

- Operant Conditioning of Fighting Behavior in Rats." *Psychological Record*, 1963, 13, 465-470.
- Ungerleider, J. T., Fisher, D. D., Fuller, M., and Caldwell, A. "The 'Bad Trip': The Etiology of the Adverse LSD Reaction." *American Journal of Psychiatry*, 1968, 124, 1483-1490.
- U.S. Department of Justice. *Uniform Crime Reports*. Washington, D.C.: U.S. Government Printing Office, annual.
- U.S. President's Commission on the Assassination of President Kennedy. *Report*. Washington, D.C.: U.S. Government Printing Office, 1964.
- United States v. Bennett*. 460 F.2d 872, 881 (D.C. Cir. 1972).
- United States v. Brawner*. 471 F.2d (D.C. Cir. 1972).
- Ursin, H. "The Temporal Lobe Substrate of Fear and Anger." *Acta Psychiatrica et Neurologica Scandinavica*, 1960, 35, 378-396.
- Ursin, H. "The Effect of Amygdaloid Lesions on Flight and Defense Behavior in Cats." *Experimental Neurology*, 1965, 11, 61-79.
- Vaernet, K. "Behaviour Disorders: Neurosurgical Theory." Paper presented at meeting of American Association of Neurological Surgeons, Los Angeles, April 1973.
- Vaernet, K. "The Relationship of Psychomotor Epilepsy to Pathological Aggression: The Effect of Amygdalotomy." In P. Harris and C. Mawdsley (Eds.), *The Natural History and Management of Epilepsy*. London: Churchill Livingstone, 1974.
- Vaernet, K., and Madsen, A. "Stereotaxic Amygdalotomy and Basofrontal Tractotomy in Psychotics with Aggressive Behaviour." *Journal of Neurology, Neurosurgery, and Psychiatry*, 1970, 33, 858-863.
- Valenstein, E. S. *Brain Control: A Critical Examination of Brain Stimulation and Psychosurgery*. New York: Wiley, 1973.
- Valenstein, E. S. "Brain Stimulation and the Origin of Violent Behavior." In W. L. Smith and A. Kling (Eds.), *Issues in Brain/Behavior Control*. Englewood Cliffs, N.J.: Prentice-Hall, 1976.
- Van Rensburg, M. J., Proctor, N. S. F., Danziger, J., and Orelovitz, M. S. "Temporal Lobe Epilepsy Due to an Intracerebral Schwannoma: Case Report." *Journal of Neurology, Neurosurgery, and Psychiatry*, 1975, 38, 703-709.
- Varma, I., and Jha, B. "Characteristics of Murder in Mental Disorder." *American Journal of Psychiatry*, 1966, 122, 1296-1298.

- Verdeaux, G., and Verdeaux, J. "Étude Électroencephalographique d'un Group Important de Délinquants Primaires ou Récidivistes au Cours de Leur Détention." *Annales Médico-Psychologiques*, 1955, 113, 143-158.
- Virkkunen, M. "Alcohol as a Factor Precipitating Aggression and Conflict Behavior Leading to Homicide." *British Journal of Addiction*, 1974, 69, 149-154.
- Vonderahe, A. H. "Discussion of E. A. Spiegel, 'Forebrain and Rage Reactions.'" *Transactions of the American Neurological Association*, 1940, 66, 127-131.
- Von Hentig, H. *Crime: Causes and Conditions*. New York: McGraw-Hill, 1947.
- Von Hentig, H. *The Criminal and His Victim*. New Haven, Conn.: Yale University Press, 1948.
- Voss, H. L., and Hepburn, J. R. "Patterns in Criminal Homicide in Chicago." *Journal of Criminal Law, Criminology, and Police Science*, 1968, 59, 499-508.
- Waldorf, D. *Careers in Dope*. Englewood Cliffs, N.J.: Prentice-Hall, 1973.
- Wales, H. "The Rise, the Fall, and the Resurrection of the Medical Model." *Georgetown Law Journal*, 1974, 63, 87-94.
- Wales, H. "An Analysis of the Proposal to 'Abolish' the Insanity Defense in S.I.: Squeezing a Lemon." *University of Pennsylvania Law Review*, 1976, 124, 687-694.
- Walker, A. E. "Discussion of W. B. Scoville, 'Observations on Medial Temporal Lobectomy and Uncotomy in the Treatment of Psychotic States.'" *Proceedings of the Association for Research in Nervous and Mental Disease*, 1953, 31, 370-371.
- Walker, A. E. "Murder and Epilepsy." *Journal of Nervous and Mental Disease*, 1961, 133, 430-437.
- Walker, A. E. "Man and His Temporal Lobes." *Surgical Neurology*, 1973, 1, 69-79.
- Walker, A. E., and Blumer, D. "Long Term Effects of Temporal Lobe Lesions on Sexual Behavior and Aggressivity." In W. S. Fields and W. H. Sweet (Eds.), *Neural Bases of Violence and Aggression*. St. Louis: Green, 1975.
- Walters, R. H., and Brown, M. "Studies of Reinforcement of Aggression. III: Transfer of Responses to an Interpersonal Situation." *Child Development*, 1963, 34, 563-571.
- Walther, F. R. "Territorial Behaviour in Certain Horned Ungulates, with Special Reference to the Examples of Thomson's and Grant's Gazelles." *Zoologica Africana*, 1972, 7, 303-307.
- Wedgwood, C. V. *The Thirty Years' War*. Harmondsworth, Middlesex, England: Penguin Books, 1957.

- Weinstein, E., and Malitz, S. "Changes in Symbolic Expression with Sodium Amytal." *American Journal of Psychiatry*, 1954, 111, 198-206.
- Weinstein, J. "Some Difficulties in Devising Rules for Determining the Truth in Judicial Trials." *Columbia Law Review*, 1966, 66, 223-230.
- Weiss, J. M. A., Lamberti, J. W., and Blackman, N. "The Sudden Murderer." *Archives of General Psychiatry*, 1960, 2, 669-678.
- Weisz, A. E., and Taylor, R. L. "American Presidential Assassinations." *Diseases of the Nervous System*, 1969, 30, 659-668. Reprinted in D. N. Daniels, M. F. Gilula, and F. M. Ochberg (Eds.), *Violence and the Struggle for Existence*. Boston: Little, Brown, 1970.
- Werner, A. "Rape: Interruption of the Therapeutic Process." *Psychotherapy: Theory, Research and Practice*, 1972, 9, 349-351.
- Wertham, F. "The Catathymic Crisis: A Clinical Entity." *Archives of Neurology and Psychiatry*, 1937, 37, 974-977.
- Wertham, F. *The Show of Violence*. New York: Doubleday, 1949.
- Wertham, F. *A Sign for Cain*. New York: Macmillan, 1966.
- West, D. J. *Murder Followed by Suicide*. Cambridge, Mass.: Harvard University Press, 1966.
- Whalen, R. *The Founding Father*. New York: New American Library, 1969.
- Wheeler, L. "Toward a Theory of Behavioral Contagion." *Psychological Review*, 1966, 73, 179-192.
- Wheeler, L., and Caggiula, A. R. "The Contagion of Aggression." *Journal of Experimental Social Psychology*, 1966, 2, 1-10.
- Wheeler, L., and Smith, S. "Censure of the Model in Contagion of Aggression." *Journal of Personality and Social Psychology*, 1967, 6, 93-98.
- Whiting, B. B., and Pope, C. P. "A Cross-Cultural Analysis of Sex Differences in the Behavior of Children Aged Three Through Eleven." *Journal of Social Psychology*, 1973, 91, 171-188.
- Whiting, J. W. M. *Becoming a Kwoma*. New Haven, Conn.: Yale University Press, 1941.
- Wichlacz, C. R., Randall, D. H., Nelson, J. H., and Kempe, C. H. "The Characteristics and Management of Child Abuse in the U.S. Army." *European Clinical Pediatrics*, 1975, 14, 545-548.

- Wiehofen, H. *Mental Disorder as a Criminal Defense*. Buffalo, N.Y.: Dennis, 1954.
- Wiehofen, H. *The Urge to Punish*. New York: Farrar, Straus & Giroux, 1956.
- Wikler, A. "Drug Dependence." In A. B. Baker and L. H. Baker (Eds.), *Clinical Neurology*. Vol. 2. New York: Harper & Row, 1976.
- Wilkins, L. T. "Efficiency, Equity, and the Clinical Approach to Offenders: Putting 'Treatment' on Trial." *Hastings Center Report*, Feb. 1975, 5, 35-48.
- Williams, J. *Psychology of Women: Behavior in a Biosocial Context*. New York: Norton, 1977.
- Wilson, A. P., and Boelkins, M. "Evidence for Seasonal Variation in Aggressive Behavior by Macaca Mulatta." *Animal Behavior*, 1970, 18, 719-724.
- Wilson, E. O. *Sociobiology: The New Synthesis*. Cambridge, Mass.: Belknap Press of Harvard University Press, 1975.
- Wilson, F. *John Wilkes Booth*. Boston: Houghton Mifflin, 1929.
- Wilson, R. N. "Social Psychiatry Revisited." *Social Science and Medicine*, 1973, 7, 85-88.
- Wilt, G. M., and Bannon, J. "A Comprehensive Analysis of Conflict-Motivated Homicides and Assaults, Detroit, 1972-1973." Washington, D.C.: Police Foundation, 1974. (Unpublished report.)
- Wimpfheimer, M., and Schafer, R. "Psychoanalytic Methodology in Helene Deutsch's Psychology of Women." *Psychoanalytic Quarterly*, 1977, 46, 287-318.
- Winkler, E., and Train, G. "Acts of Violence with Electroencephalographic Changes." *Quarterly Review of Psychiatry and Neurology*, 1959, 20, 223-230.
- Wisconsin Department of Public Welfare, Bureau of Research and Statistics. *Statistical Bulletin C-46*. Madison: Department of Public Welfare, 1965.
- Wiseman, C. S., and Field, A. M. "The Stampede Gangs." *Newsweek*, International Edition, June 7, 1976, pp. 24-25.
- Woddis, G. "Depression and Crime." *British Journal of Delinquency*, 1957, 8, 85-94.
- Wolfgang, M. E. *Patterns in Criminal Homicide*. Philadelphia: University of Pennsylvania Press, 1958.
- Wolfgang, M. E. "Who Kills Whom." *Psychology Today*, 1969, 3 (5), 54-56, 72-75.
- Wolfgang, M. E. *The Sociology of Crime and Delinquency*. New York: Wiley, 1970a.

- Wolfgang, M. E. *Youth and Violence*. Washington, D.C.: U.S. Department of Health, Education, and Welfare, 1970b.
- Wolfgang, M. E., and Ferracuti, F. *The Subculture of Violence*. London: Tavistock, 1967.
- Wolman, B. B. "Leadership and Group Dynamics." *Journal of Social Psychology*, 1956, 43, 11-25.
- Wolman, B. B. "Instrumental, Mutual Acceptance, and Vectorial Groups." *Acta Sociologica*, 1958a, 3, 19-28.
- Wolman, B. B. "The Deterioration of the Ego in Schizophrenia." Paper presented at meeting of Eastern Psychological Association, 1958b.
- Wolman, B. B. "Impact of Failure on Group Cohesiveness." *Journal of Social Psychology*, 1960, 51, 409-418.
- Wolman, B. B. *Children Without Childhood*. New York: Grune & Stratton, 1970.
- Wolman, B. B. "The Rebellion of Youth." *International Journal of Social Psychiatry*, 1971, 18, 21-27.
- Wolman, B. B. "Human Belligerence." *International Journal of Group Tensions*, 1972, 2, 56-68.
- Wolman, B. B. *Call No Man Normal*. New York: International Universities Press, 1973a.
- Wolman, B. B. "Violent Behavior." *International Journal of Group Tensions*, 1973b, 3, 127-141.
- Wolman, B. B. "Aggression: Power and Acceptance Theory." In B. B. Wolman (Ed.), *International Encyclopedia of Psychiatry, Psychoanalysis, and Neurology*. New York: Aesculapius and Van Nostrand, 1977.
- Wood, C. D. "Behavioral Changes Following Discrete Lesions of Temporal Lobe Structures." *Neurology*, 1958, 8, 215-220.
- Wright, M. E. "Constructiveness of Play as Affected by Group Organization and Frustration." *Character and Personality*, 1942, 11, 40-49.
- Wurmser, L. "Methadone and the Craving for Narcotics: Observations of Patients on Methadone Maintenance in Psychotherapy." *Proceedings of the 4th National Conference on Methadone Treatment*, 1972, 4, 525-528.
- Wyden, P. *The Hired Killers*. New York: Morrow, 1963.
- Yablonski, L. "The Violent Gang." *Commentary*, 1960, 30, 125-130.
- Yates, A. J. "Sexual Disorders." In A. J. Yates, *Behavior Therapy*. New York: Wiley, 1970.
- Young, L. *Wednesday's Children: A Study of Child Neglect and Abuse*. New York: McGraw-Hill, 1964.

- Zeeman, E. C. "Catastrophe Theory." *Scientific American*, 1976, 234, 65-83.
- Zilboorg, G. "Misconceptions of Legal Insanity." *American Journal of Orthopsychiatry*, 1939, 9, 540-554.
- Zillmann, D. "Excitation Transfer in Communication-Mediated Aggressive Behavior." *Journal of Experimental Social Psychology*, 1971, 7, 419-434.
- Zillmann, D., and Bryant, J. "The Effect of Residual Excitation on the Emotional Response to Provocation and Delayed Aggressive Behavior." *Journal of Personality and Social Psychology*, 1974, 30, 782-791.
- Zillmann, D., Bryant, J., Cantor, J., and Day, K. "Irrelevance of Mitigating Circumstances in Retaliatory Behavior at High Levels of Excitation." *Journal of Research in Personality*, 1975, 9, 282-293.
- Zillmann, D., and Cantor, J. R. "Effects of Timing of Information About Mitigating Circumstances on Emotional Response to Provocation and Retaliatory Behavior." *Journal of Experimental Social Psychology*, 1976, 12, 38-55.
- Zillmann, D., Johnson, R. C., and Day, K. "Attribution of Apparent Arousal and Proficiency of Recovery from Sympathetic Activation Affecting Excitation Transfer to Aggressive Behavior." *Journal of Experimental Social Psychology*, 1974, 10, 503-515.
- Zillmann, D., Katcher, A. H., and Milavsky, B. "Excitation Transfer from Physical Exercise to Subsequent Aggressive Behavior." *Journal of Experimental Social Psychology*, 1972, 8, 247-259.
- Zimbardo, P. "The Mind Is a Formidable Jailer: A Pirandellian Prison." *The New York Times Magazine*, April 8, 1973.
- Ziskin, J. *Coping with Psychiatric and Psychological Testimony*. (2nd ed.) Beverly Hills, Calif.: Law and Psychiatry Press, 1975.
- Zucker, L. J. "Ego Weakness, Ego Defenses, and Ego Strengthening Techniques." *American Journal of Psychotherapy*, 1959, 13, 614-634.



# Index



## A

- Abel, G. G., 433  
Abel, G. G., Barlow, D. H., and others, 428, 431  
Abel, G. G., Blanchard, E. B., and Becker, J. V., 427-428, 430, 431  
Abortion, 196  
Abraham, K., 278  
Abrahamsen, D., 402  
Active-passive dichotomy. *See* Bipolar thinking  
Adler, A., 12-13, 206  
Adler, F., 267, 268  
Adolescent murder, 176-178, 185;  
    by girls, 267-268  
Adversary system, 374, 394-403  
Aggression: abnormal, 101-132;  
    adaptive, 2-3, 11-12, 21, 63-64;  
    anger and, 346-351, 353, 375, 409;  
    in animals, 3, 4-5, 15, 74-100, 269-271, 314-315; arousal and, 350-358;  
    aversively motivated, 41-45, 49-50; behavioral theories of, 3-4, 29-57;  
    benign, 2-3, 14, 15-16, 21, 27-28; biology of, 75, 268-271, 314-315;  
    and brain disorders, 6, 106-116, 121, 127-128, 145, 181, 290;  
    catharsis of, 358-361; collective, 4, 30, 36-38, 45, 216-217;  
    comprehensive theory of, 27-28; conformist, 16;  
    contagious, 36-38, 225; cultural variation in, 33, 191-192, 240-241, 246-247, 262-263, 272, 304, 305, 313-314;  
    definitions

- of, 3, 4, 11, 30, 60-61, 280; desensitization to, 56; destructive, 3, 11, 12-13, 16, 26, 179-183, 186; displacement of, 19, 55; and drugs (*see* Drugs); ego boundaries and, 20-26, 27-28; ego psychology and, 17-28; environmental explanations of, 273-274; in epileptics, 110-115, 122-124, 145; ethological theories of, 4-5, 15, 74-100, 271-272; ethology and human, 94-100, 271-272, 405; familial influences on, 34, 203-208; fantasies and dreams of, 22, 24, 360; female (*see* Child abuse; Family murder; Female aggression; Women murderers); frustration hypothesis of, 9, 41, 44, 117, 343-350; group, 25-26; high temperature's influence on, 351-352; hormonal factors in, 268-271, 276, 412; hostile, 52, 53, 60; impact of, 19-20; impulsive, 60, 153-154, 162, 346-347; instigators of, 4, 32, 39-47; instinct theory of, 76-81, 86-89; institutional, 30-31, 363-369, 370; instrumental, 16, 26, 51-52, 60, 65, 345-346, 369; insults and, 346-348, 354; internalization of, 19-20, 280; and interpersonal relations, 14-15, 179-183; irrational, 345-346; justification of, by euphemistic labeling, 54-55; learning of, 3-4, 29-57, 225, 361-363, 442; limbic system abnormalities and, 6, 104, 105, 106-116, 145; malignant, 3, 15, 16, 28; and measurement problems across species, 98; minimizing of, 54; misrepresentation of consequences of, 56; modeling influences of, 31-41, 361-363; and modes of adaptation, 63-64; and mother-child relationship, 9-10, 15, 26-27, 273, 487 (*see also* Family violence; Mothers); motivational determinants of, 41, 42; neutralization of, 19-20, 21, 280; obedient, 46-47, 50, 364-367, 468-469; pain and, 42-43, 50-52; passive, 18, 280, 341; pathological, 25, 26-27, 28, 142-144, 150, 291-292, 368; physical assault to provoke, 41-43; preoedipal development of, 281-282; in prisons, 368-369; pseudo-, 15-16; psychoanalytic theories of, 2-3, 7-28, 278-284; psychodynamics of, 27-28, 135-136; psychological literature on, 274-278; reinforcers of, 32, 45-46, 47-56; research studies of, 236-237, 343-370; responsibility for, 55; roles of, in social systems, 4, 68-71; self-reinforcement of, 53-54; sex differences in, 272-284; sex role models of, 191-192; sexual (*see* Sexual offenders); social learning theory of, 3-4, 29-57, 225, 361-363; social and status rewards for, 48-49; socially sanctioned (*see* Warfare); sociobiological theories of, 101-132; sociological theories of, 4, 58-73, 116-120, 121, 272-274; sources of, 4, 32, 34-47; species-specific, 5, 76, 78, 86-87, 89, 98, 100; stimuli associated with, 358-360; subcultural influences on, 34-35, 43, 64-67, 119-120, 190, 246-248, 251-253, 256-264; sublimation of, 19-20; substance-induced, 236, 317-342 (*see also* Drugs); theories of, 2-132; vicarious reinforcement of, 52-53. *See also* Violence; Warfare
- Airline hijacking, 36-37
- Albert, S., 361*n*
- Alcohol, 115, 146, 289-290, 309, 317, 318, 319-326; as brain poison, 115, 121, 146, 325; usage of, combined with other drugs, 334-335, 337-339
- Alcoholic paranoia, 324
- Alcoholics, LSD given to, 334-335
- Alcoholism, drugs to control, 412
- Alfonso-De Florida, F., and Delgado, J. M. R., 107
- Alpert, R., 334
- Amir, M., 303-308 *passim*, 311-312
- Amnesia, of offenders, 399

- Amphetamines, 318, 319, 327-330;  
usage of, combined with other  
drugs, 337-339; and murder, 146,  
327-328
- Amygdala, 6, 106-116, 412
- Anaesthetics, 318
- Anand, B. K., and Dua, S., 107
- Androgeny, psychological, 283
- Andy, O., 124
- Anger, 346-351, 353, 375, 409
- Animal behavior, 3, 4-5, 15, 74-100,  
105, 269-271, 314-315
- Animals: ambiguous attitudes  
toward killing, 182-183; brain re-  
search on, 107-110; training  
fighter, 38-39
- Anomie, concept of, 63-64
- Antelope, territorial systems of, 78,  
82-86, 87, 89, 90, 93
- Antipsychiatry movement, 124,  
127-130
- Antithesis, principle of, 80
- Appeasement rituals, animal, 79-81
- Archer, D., and Gartner, R., 136-  
137, 219-232
- Archetypical behavior, 13
- Ardrey, R., 4, 75
- Arendt, H., 363-364
- Aristotle, 102, 103, 217, 347, 348,  
361
- Asch, S., 362
- Assassins, 12, 33, 47, 136, 150,  
198-218; core psychology pecu-  
liar to, 201-203; rebellious-rival-  
rous personality of, 200, 202-  
207, 209, 215; Secret Service pro-  
file of, 200-201, 217-218
- Assault, 310
- Atascadero State Hospital, 414, 416
- Attica Prison, 466-467
- Automobile-alcohol violence, 115
- Aversion therapy, 416, 431-433
- Azrin, N. H., 42, 43, 48
- B**
- Bach-y-Rita, G., 323, 405, 406, 410
- Bailey, P., 101
- Balance theory, structure of, 62
- Balasubramanian, V., 112
- Balinese, 350
- Bandura, A., 3-4, 26, 29-57, 224-  
225, 273-274, 343, 361-362
- Bandura, A., Ross, D., and Ross,  
S. A., 35, 52, 117, 361-362
- Bandura, A., and Walters, R. H., 34,  
45, 49, 54, 272
- Barbiturates, and murder, 146
- Bard, M., 250
- Bard, P., and Mountcastle, V. B.,  
107
- Bardwick, J., 268-270
- Baron, R. A., and Bell, P. A., 352
- Barter, J. T., and Reite, M., 335, 338
- Bateson, G., 33, 350
- Battered-child syndrome, 238, 447-  
448. *See also* Child abuse
- Bayh, B., 255, 266
- Bazelson, D., 403
- Behavior modification programs, in  
prisons, 386-387
- Behavioral theories, 3-4, 29-57
- Bellak, L., 17, 18-19, 21
- Bem, S. L., 283
- Bem, S. L., and Bem, D. J., 470
- Bender, B., 448
- Berger, H., 140
- Berger, M., 447
- Berkowitz, L., 40, 60, 343, 346-347,  
358-359, 360, 484
- Berkowitz, L., and LePage, A., 359
- Berkowitz, L., and Rawlings, E., 358
- Bettelheim, B., 181, 447
- Bibring, E., 19, 175
- Bipolar thinking, 275, 277, 279-280,  
283
- Birds, 80, 84, 93
- Birth trauma, 13-14
- Blum, A., and Fisher, G., 136,  
187-197
- Blumberg, M., 448
- Bonaparte, M., 278
- Booth, J. W., 199, 203, 208-212
- Borderline personality organization,  
24-25
- Bowles, S., 263, 265
- Brain: alcohol's effects on, 115, 121,  
146, 325; animal, 107-110; dis-  
orders of, 6, 106-116, 121, 127-  
128, 145, 180-181, 290; environ-  
ment interaction, 5-6, 101-132;  
functions of, 5-6, 104-106

Brandeis, L., 232  
 Brecher, E. M., and others, 327, 329, 336, 337  
 Breggin, P. R., 124, 125  
 Bremer, A., 203, 208  
 Brenner, C., 8-9, 10, 449  
 Brian, E., 222  
 Bromberg, W., 144  
 Bronfenbrenner, U., 247  
 Brothers, family position of, 203-208  
 Broverman, D. M., Broverman, F., and others, 267, 276, 277  
 Brown, B. A., 307  
 Brown, B. S., Wienckowski, L. A., and Bivens, L. W., 124  
 Brownmiller, S., 303, 310, 312, 314  
 Bruch, H., 147  
 Brutality, in prison simulation, 368-369  
 Burgess, A., and Holmstrom, L., 448  
 Burkhart, K., 189, 190  
 Burnstein, and Worchel, P., 349-350  
 Burt, R., 395, 402  
 Buss, A. H., 343, 345-346  
 Bychowski, G., 447

## C

Calhoun, J. B., 87  
 Calley, W., 221  
 Calvin, J. A. V., and MacDonald, J. H., 152  
 Carey, J. T., and Mandel, J., 329  
 Carnivores, social, 80-81, 86, 95-96  
 Castration, 311, 313-314  
 Catathymic crisis, 135, 154-155, 165-170  
 Catathymic murder, 135, 143, 154-158, 161, 162-163  
 Catharsis, 358-361  
 Cats, 107, 161, 162  
 Chandler, D. B., 61  
 Cheek, F. E., and Holstein, C. M., 334  
 Chernoff, P., and Schaeffer, W., 401  
 Chesler, P., 194  
 Child abuse, 178, 180-183, 236, 285-300, 447-448; definitions of, 286-287; distribution of, 288, 292; generational transmission

of, 293-294, 388, 448; influence of alcohol and drugs in, 289-290; in military families, 298; psychological factors in, 288-298; relationship between violence in general and, 298-300; sexual, 286-287, 301, 302-303, 415-416, 426-427; societal concern about, 470-476; socioeconomic factors in, 294, 298; statistics about, 287-288, 292; victims of, 293-294, 388, 447-448, 455, 456-457  
 Child development, 179-183, 293-294, 388, 448; phases of moral development in, 484-493; physical punishment and, 295-296, 298-299, 465; preoedipal, 281-282. *See also* Schools  
 Child molestation, 286-287, 301, 302-303, 415-416, 426-427  
 Child murder, 155-158; abuse commonly preceding, 289; by parents, 140, 173-175, 192-196, 245; by siblings, 175-176, 245. *See also* Family murder  
 Chimpanzee society, 87  
 Chodoff, P., 447  
 Chorover, S. L., 108, 121  
 Christopher, R., 409  
 Chromosomes, 145, 275-276  
 Cleaver, E., 307  
 Cleckley, H., 25  
 Cloward, R. A., and Ohlin, L. E., 64, 65, 119, 252  
 Cocaine, 338  
 Coghill, G. E., 101, 103  
 Cognition, sex differences in, 275-276  
 Cognitive balance theory, 62  
 Cognitive dissonance theory, 469, 478  
 Cohen, A. K., 66, 67  
 Cohen, S., 333, 336  
 Cohen, S., and Ditman, K. S., 333  
 Cole, A. B., 262  
 Cole, K., Fisher, G., and Cole, S., 196  
 Coleman, J. S., 71-72  
 Collins, R., 61, 72  
 Comparative Crime Data File (CCDF), 226-230

- Competition: among animals, 76, 84-85; and hormone levels in humans, 268-269; semantic confusion in metaphoric use of word, 277-278; in sports, 361. *See also* Conflict  
 Concentration camp survivors, 447, 456  
 Conflict: natural histories of, 70-71; roles of, in social systems, 4, 65, 68-71; types of, 18  
 Conflict sociology, theory of, 72-73  
 Conflict subculture, 65  
 Conflict theory, 469  
 Conformist aggression, 16  
 Conformity, 63, 362, 469  
 Connell, P. H., 328  
 Contagious aggression, 36-38, 225  
 Corder, B. F., and others, 177-178  
 Cormier, B. M., 178-179  
 Coser, L. A., 69, 469  
 Couzens, M., 463  
 Covert sensitization, 431-433  
 Creativity, 481-482  
 Crime: and heroin related activities, 330-333; prevention of, 373-374, 378-380, 382-383; psychiatric study of, 135-136; rates of, 190-192; street, 150. *See also* Murder; Women murderers  
 Criminal intent, concept of, 22  
 Criminal subcultures, 65  
 Criminals, professional, 150-151  
 Crook, J. H., 92  
 Cross-cultural studies, 33, 191-192, 240-241, 246-247, 262-263, 272, 304, 305, 313-314  
 Cruelty, 16, 55  
 Cultural influences, 33, 191-192, 240-241, 272, 362. *See also* Cross-cultural studies; Subcultures  
 Culture-conflict hypothesis, 117  
 Currie, S., and others, 110-111  
 Curtis, L. A., 309-310  
 Cycloid personality, 26-27  
 Czolgosz, L., 202, 203  
 David, R. L., and Siegenthaler, J. K., 235, 254-266  
 Davidson, H., 403  
 Davies, J. C., 44  
 Davis, D. R., 328  
 Death instinct, 8, 11, 15, 17, 363  
 Deiker, T. E., 142  
 Delirium tremens, 324-325  
 DeLong, J. V., 330  
 Democracy, 216-217  
 DeMolina, A. F., and Hunsperger, R. W., 107  
 Denmark, 305, 308, 311, 313-314  
 Depressant drugs, 318. *See also* Alcohol  
 Descartes, R., 102-103  
 Deterrence. *See* Prisons; Violent offenders  
 Detoxification, 339-340  
 Deutsch, H., 260, 278-279, 280, 281  
 Devlin, Lord, 396  
 di Furia, G., 423, 426  
 di Furia, G., and Mees, H. L., 413, 421, 423  
 Diamond, B., and Louisell, D., 397  
 Diamond, M., 216  
 Dillon, S. V., and Grout, J. A., 257  
 Ditricks, R., Simon, S., and Greene, B., 53  
 Dixon, T., and Blondis, R., 400  
 Dollard, J., and others, 9, 344  
 Donnerstein, E., Donnerstein, M., and Evans, R., 352  
 Doob, L., and Sears, R., 348  
 Drabman, R. S., and Thomas, M. H., 362  
 Dreiser, T., 152  
 Drewe, E. A., and others, 108  
 Drugs: and child abuse, 289-290; combinations of, 334-335, 337-339; dosages of, 319, 324-325, 328-329, 331-332, 334-336; environments during use of, 319, 325-326, 330, 333, 336-337; overdoses of, 338; personality of users of, 146, 318-319, 320-324, 327-328, 331, 334-335; reasons for use of, 317-319; treatment of abusers of, 339-342; in treatment of violent individuals, 381, 392, 411-412; types of, 318. *See also* Alcohol; Amphetamines;

## D

Darrow, C., 230  
 Darwin, C., 77, 80

- Heroin; Lysergic acid diethylamide (LSD)  
 Dualism: of bipolar thinking, 275, 277, 279-280, 283; mind-body, 102-106  
 Duncan, J. W., and Duncan, G. M., 136, 171-186  
 Durkheim, E., 63

## E

- Education. *See* Schools  
 Egger, M. D., and Flynn, J. P., 107  
 Ego: boundaries, 20-26, 27-28; functioning, 22, 283, 318; growth, 280, 281, 485; instinct, 11-12; psychology, 17-28  
 Einstein, A., 234  
 Eisenberg, J. F., 81  
 Electroencephalographic (EEG) examination, 140-141, 291  
 Ellinwood, E. H., 327, 338  
 Emotional brain, 5-6, 106  
 Emotions, physiological arousal and, 353-357. *See also* Anger; Fear  
 Endleman, S., 119  
 Environment, 5-6, 101-132, 273-274  
 Epilepsy, 110-115, 122-124, 145; drugs to control, 412; and EEG correlates, 140-141  
 Equality, 216-217, 263-266  
 Erikson, E., 275  
 Erlanger, H. S., and Winsborough, H. H., 67  
 Ervin, F. R., 101, 323, 405, 406  
 Estes, R. D., 91  
 Estrogen, 268-269, 276  
 Ethology, 4-5, 15, 74-100; criticisms of theories of, 81-94; and human aggression, 94-100, 271-272, 405. *See also* Sociobiological theories  
 Evolution, 74-75  
 Exercise, physical, 355-356  
 Exhibitionism, 302, 303-304, 426; treatment of, 422, 423-424  
 Expert witnesses, 397-401

## F

- Fabing, H. D., 146

- Factor, M., 448  
 Fairbairn, W. R. D., 15  
 Falconer, M. A., and others, 109, 110, 124, 125  
 Family murder, 136, 152, 153, 171-186, 190; of fathers, 177-178, 245; husband-wife, 178-179, 192, 242-246; of mothers, 176-177, 179, 245; police prevention of, 248-251; process of, 183-186; reduction of, 250-251, 252; statistics on, 242-248. *See also* Child murder  
 Family therapy, in prisons, 386, 388-389  
 Family violence, 179-183, 234-235, 238-253, 299-300. *See also* Child abuse; Child murder; Family murder  
 Fararo, T. J., 62, 71, 72  
 Fathers: who kill their children, 174, 194, 195; murder of, 177-178, 245  
 Faulkner, R. K., 66  
 Fear, 111, 353, 482; and murder, 146-147; victim's, 472, 477  
 Federn, P., 21  
 Female aggression, 136, 187-197, 235-236, 267-284; biological evidence of, 268-272; cultural influences on, 191-192, 272; psychoanalytic theories of, 278-284; sociological and psychological factors in, 272-278. *See also* Child abuse; Family murder; Women murderers  
 Females. *See* Mothers; Wives; Women  
 Fenichel, O., 17, 282  
 Ferrier, Sir D., 103  
 Feshbach, S., 52, 60, 273, 360  
 Festinger, L., 469, 478  
 Filicide. *See* Child murder  
 Fixed action patterns (FAPs), 77-79  
 Flight or fight reaction, 22-23, 42-43  
 Fontana, V. J., 286, 470, 471, 474  
 Force, society's uses of, 468-469  
 Forensic institutions, 385-389  
 Fratricide. *See* Siblings  
 Freedman, L., 201-203  
 Freedom, meaning of, 492-493  
 Freud, S., 2, 8-12, 19, 139, 206, 234,

- 278-280, 281, 344, 352, 358, 360, 363, 448, 484, 487  
 Friedenberg, E., 256  
 Frisbie, L. V., and Dondis, E. H., 309, 314  
 Fromm, E., 15-17, 26, 483  
 Frustration. *See* Aggression
- G
- Gager, N., and Schurr, C., 471, 475, 477, 478  
 Gastant, H., Morin, C., and Lesèvre, N., 110  
 Gault, W., 161  
 Gayral, L., and others, 154, 165  
 Gebhard, P. H., Gagnon, J. H., and Pomeroy, W. B., 309  
 Geen, R. G., 50, 348  
 Geen, R. G., and Berkowitz, L., 348, 358  
 Geen, R. G., and O'Neal, E. C., 343, 351  
 Gelles, R. J., 247-248, 288, 478  
 Genêt, J., 314  
 German, J., and Singer, A., 401  
 Geschwind, N., 124  
 Gibbs, E., and Gibbs, F., 141  
 Gillespi, J., 347  
 Glickman, L., and Blumenfield, M., 335  
 Gloor, P., 111, 122  
 Glueck, S., and Glueck, E., 34, 252  
 Goldstein, J. H., 319, 325, 327, 395, 402, 412  
 Goode, W. J., 468-469  
 Governments, 222-224. *See also* Warfare  
 Grade schools, 257-260  
 Griffith, J., 330  
 Grinspoon, L., and Hedblom, P., 328  
 Group spirit, 488-489  
 Group therapy in prison setting, 434-437; for sexual offenders, 413-425, 428, 429, 430; theoretical approaches to, 421-425; for violent offenders, 386, 409-411; for violent police, 442-445  
 Guilt, 139-140  
 Guiteau, C., 202, 203, 208-213 *passim*  
 Gurr, T. R., 45, 216-217  
 Gutheil, E. A., 21, 24  
 Guttmacher, M., 158, 162, 311, 313
- H
- Haber, S., and Seidenberg, B., 375-376, 462-479  
 Halleck, S., 145, 372-374, 377-393, 421, 427  
 Hallucinogens, 318, 319. *See also* Lysergic acid diethylamide (LSD)  
 Hanks, S. E., and Rosenbaum, C. P., 320  
 Harris, I. D., 136, 198-218  
 Harris, M., and Huang, L., 351  
 Harrison, M., and Pepitone, A., 362  
 Hartman, M., 190  
 Hartmann, D. P., 21, 40, 43  
 Hartmann, H., Kris, E., and Lowenstein, R., 11, 17-20 *passim*, 272, 280  
 Hartocollis, P., 28  
 Hawthorne, N., 171  
 Hayman, C. R., 305, 307  
 Hearst, P., 395  
 Heat, arousal effects of, 351-352  
 Heath, R. G., Monroe, R. R., and Mickle, W. A., 123  
 Heirens, W., 158-159, 160  
 Henn, F., 236, 301-316  
 Henn, F. A., Herjanic, M., and Vanderpearl, R. H., 302, 306, 311, 312  
 Henry, C. E., 141  
 Henry, J., 256  
 Henry, P., 207  
 Herjanic, M., and Meyer, D., 447  
 Heroin, 318, 330-333; dosages of, 331-332; expectations of, 332-333; personality of abusers of, 331; setting for usage of, 333; usage of, combined with other drugs, 338-339  
 Herrick, C. J., 101, 103  
 High schools, 260  
 Hijackings, airline, 36-37  
 Hill, D., and Pond, A., 141  
 Hillman, D. S., and Blackman, N., 161  
 Hinde, R. A., 81, 82, 89, 92, 97, 98  
 Hobbes, T., 199, 465  
 Hoffman, F. G., 318, 319, 338

Homicide. *See* Murder  
 Homosexual rape, 314  
 Homosexuality, 414-415  
 Hormones, 268-271, 276, 412  
 Hornberger, R. H., 361  
 Horney, K., 14, 155, 278, 483  
 Hospitals. *See* Forensic institutions  
 Hovland, C., and Sears, R., 344  
 Howe, F., and Lauter, P., 263  
 Huggins, M. D., and Straus, M. A., 232  
 Hume, D., 199  
 Humor, 360  
 Huntington, S., 216  
 Husband-wife murders, 178-179, 192, 242-246  
 Huxley, T. H., 90  
 Hyperkinesis, 412  
 Hypnosis, 140

## I

Iglitzin, L. B., 466, 467  
 Individual psychology (Adler), 12-13  
 Infanticide. *See* Child murder  
 Innate releasing mechanism (IRM), 79  
 Innovation, 63-64  
 Insanity defense, 395-403  
 Institutional aggression, 30-31, 363-369, 370. *See also* Warfare  
 Insults, 346-348, 354; mitigation for, 356-357  
 Interpersonal relations, 14-15, 179-183  
 Ivey, E. F., 21

## J

Jacobson, E., 281  
 Jameison, G. R., 167  
 James, H., 207  
 Japan, 262  
 Jencks, C., 263, 265  
 Jenkins, R. L., 313  
 Johnson, L. B., 206  
 Johnson, P., 214  
 Jones, H. M., 132  
 Jung, C., 13  
 Juvenile gangs, 65-66, 119

## K

Kadish, M. R., and Kadish, S. H., 468  
 Kagan, J., and Moss, H. A., 274  
 Kahn, M. W., 39, 142  
 Kahn, R. L., 468  
 Katz, E., 472  
 Katz, J., and Goldstein, J., 402  
 Kempe, C. H., and others, 447-448  
 Kennedy, J. F., 200, 206  
 Kent State University, 466-467, 469  
 Kilpatrick, J. J., 199  
 Kimmel, S., 209-210  
 Kitsuse, J. I., and Dietrick, D. C., 66  
 Klee, G. C., 334  
 Klein, M., 15, 482  
 Klinefelter's syndrome, 270  
 Kling, A., 107  
 Klüver, H., and Bucy, P. C., 108  
 Knipmeyer, J., and Presthaldt, P., 351  
 Kohl, H., 256  
 Kohlberg, L., 247, 295  
 Kohn, M. L., 247  
 Kohut, H., 18  
 Konečni, V., 351  
 Kozol, H. L., Boucher, R. J., and Garofalo, R. F., 390, 407  
 Kozol, J., 256, 427  
 Kraepelin, E., 144  
 Krafft-Ebing, R., 144  
 Kriesberg, L., 70  
 Krystal, H., 447  
 Kummer, H., 88  
 Kutash, I. L., 375, 446-461  
 Kutash, I. L., and Schlesinger, L. B., 22, 374  
 Kutash, S. B., 2-3, 7-28

## L

Lack, D., 86  
 Language disability, 181, 185  
 Lasswell, H., 402  
 Latané, B., and Darley, J., 362  
 Law, and psychiatry, 374, 394-403  
 Law enforcement officers, 248-251; treating violent, 375, 438-445  
 Lawick-Goodall, J. van, 87  
 Learning: difficulties with, 387-388;



- social, 3-4, 29-57, 225, 361-363, 442  
 Leary, T., 334  
 Leary, T., Metzner, R., and Alpert, R., 336  
 Lechwe, 84-94 *passim*  
 Lee, J. C., 115  
 Lek system, 84-93 *passim*  
 Lester, D., 141-142, 192  
 Levinger, G., 247  
 Ley, A., and Versele, S., 139  
 Leyhausen, P., 87  
 Libido theory, 9-11, 17, 19-20  
 Life crises, child abuse precipitated by, 297-298  
 Life instinct (Freud), 8, 11  
 Lifton, R. J., 230  
 Limbic, system, 6, 104, 105, 106-116, 145  
 Lincoln, A., 211-212  
 Lion, J. R., 404-412 *passim*  
 Lorenz, K., 4, 75-81, 82, 86, 94-100, 271, 361  
 Lysergic acid diethylamide (LSD), 146, 318, 333-337; and child abuse, 289; -related murder, 146, 335, 336, 338; usage of, combined with other drugs, 338
- M**
- McCaldon, R. J., 306, 309  
 McClelland, D., 274-275  
 McClelland, D., and Apicella, F. S., 347  
 Maccoby, E. E., and Jacklin, C., 273, 274  
 MacDonald, J. H., 139, 303, 305, 306, 308, 309, 311, 312  
 McDougall, W., 11  
 McFarland, R. A., Ryan, G. A., and Dingman, R., 115  
 McGarry, L., 402  
 McGlynn, R., Megas, J., and Benson, D., 193-194  
 Machismo, 241, 268-270, 305-306, 315  
 McHugh, P., 252  
 McLaurin, R. L., and Heimer, F., 109  
 McNamee, H. B., Mello, N. K., and Mendelson, J., 321  
 Madden, D. J., and Lion, J. R., 374, 404-412  
 Mahler, M., 26  
 Maier, H. W., 154, 165  
 Malamud, N., 128  
 Male aggression, 268-270, 305-306  
 Male assertiveness, 241  
 Malinowski, B., 314  
 Manic-depressive psychosis, 26-27  
 Mark, V. H., 5-6, 101-132  
 Mark, V. H., and Ervin, F. R., 101, 120, 145, 412  
 Mark, V. H., and Ordia, I. J., 123  
 Mark, V. H., and Sweet, W. H., 125  
 Markov chain, 68  
 Marler, P., 86  
 Marler, P., and Hamilton, W. J., 92  
 Martin, D., 476  
 Marx, K., and Engels, F., 63  
 Masochism: followed by murder, 178, 196; of victims, 448-449  
 Mathematical models, 71-72  
 Mathis, J. L., and Collins, M., 422, 423-424, 426  
 Matricide. *See* Family murder  
 Mattucek, P., 447  
 Matza, D., 64-65  
 Maudsley, H., 110  
 Mayfield, D., 146, 322-323  
 Mead, M., 33, 272  
 Megargee, E. I., 321  
 Melville, H., 207-208  
 Memory circuit, 104-105  
 Mendelsohn, B., 446-447  
 Menninger, K., 372, 396  
 Menninger, K., and Mayman, M., 154, 165  
 Menninger, K., Mayman, M., and Pruyser, P., 322  
 Mental health, standards of, 187-190, 193-195, 196, 277, 282-283, 308-309. *See also* Insanity defense  
 Mental retardation, 290  
 Merton, R., 63-64, 344  
 Meyerson, A., 140  
 Milgram, S., 46-47, 50, 55, 364-367  
 Military families, 298  
 Military training. *See* Warfare  
 Miller, D., and Looney, J., 142-143, 144, 161

- Miller, N. E., 4, 9, 344  
 Miller, W. B., 66, 241  
 M'Naghten, D., 147  
 Modeling influences. *See* Learning  
 Mohr, J. W., Turner, R. E., and Jerry, M. B., 302, 306  
 Montagu, A., 75, 481  
 Morris, D., 4, 75  
 Morris, M., Gould, R., and Matthews, P., 447  
 Morris, N., and Jacobs, J., 430  
 Moscovici, S., and Faucheux, C., 469  
 Moss, H., 273  
 Mother-child relationships, 9-10, 15, 26-27, 273, 487  
 Mothers: who kill their children, 140, 173-175, 192-196; murder of, 176-177, 179, 245; wife-victims as surrogate, 179  
 Moulton, R., 280  
 Murder, 134-232; catathymic, 135, 143, 154-158, 161, 162-164; classification of, 135, 144-160; compulsive, 158-160, 161, 162; contagious methods of, 225; deterrence theory on punishment for, 379; drugs and (*see* Drugs); environmentally stimulated, 149-152, 162, 164; false confessions of, 139; for a fee, 151-152; impulsive, 153-154, 162; legal, 136-137, 182-183, 219-232; literature review on, 172; mass, 145-146, 147; motivational stimulation of, 149-160; organic explanations of, 145; paranoid delusions leading to, 47, 146-148; political, 12, 33, 47, 136, 150, 198-218; postwar increases in, 225-232; power-motivated, 12-13; prediction of, 135, 161-164; premeditated, 145-146; by professional criminals, 150-151; sex, 158-160, 161-164; situational, 152-153, 162, 164; threats to commit, 161; victim's role in, 172-173, 179, 447; wars, and changes in rate of, 225-232; weapons, 96, 192, 246. *See also* Child murder; Family murder; Murderers: age of, 192-193; guilt of, 139-140; psychiatric and psychological evaluation of, 135, 138-164, 196-197; rates of male and female, 190-191; treatment of, 186. *See also* Assassins; Violent offenders; Women murderers  
 Murray, H. A., 17  
 Mushrooms, *Amanita muscaria*, 146  
 Myers, S., 193
- ## N
- Narabayashi, H., 113  
 Narabayashi, H., and Uno, M., 111  
 Narcissistic personality, 18, 484-485  
 Narcoanalysis, 140  
 Narcotics, 318, 337-339. *See also* Heroin  
 Nathan, P. E., and Lisman, S. A., 325  
 National Commission on the Causes and Prevention of Violence, 222-223, 245-246, 308, 309, 375  
 Nature-nurture debate, 75-76, 179  
 Nazi atrocities, 49, 51, 150, 363-364  
 Necrophilia, 16  
 Neiderland, W. B., 447  
 Neonaticide, 173-174, 195-196  
 Neurological disease, 6, 106-116  
 New York City Police Department, 441-442  
 Nicol, A. R., and others, 320  
 Nietzsche, F. W., 401  
 Noise, 351  
 Nonviolence, 253  
 Notman, M., and Nadelson, C., 448
- ## O
- Oakes, M., 268  
 Obedient aggression, 46-47, 50, 364-367, 468-469. *See also* Warfare  
 Object relations theory, 15  
 O'Brien, J., 247  
 Observational learning, 33-38  
 Obsessive-compulsive personality structure, 24  
 Oedipus complex, 9-10, 487  
 Ogden, C. K., and Richards, I. A., 277

- Orenstein, L., and Weisstein, A., 147  
 Osman, E., and Lee, C.-t., 4, 58-73  
 Oswald, L. H., 202, 203-214 *passim*  
 Ounsted, C., Lindsay, J., and Norman, P., 111  
 Ounsted, C., Oppenheimer, R., and Lindsay, J., 291, 448
- P**
- Pacht, A. R., 418, 420, 429  
 Pacht, A. R., Halleck, S., and Ehrmann, J. C., 418, 420, 423, 426  
 Paillas, J. E., 111  
 Pain, 42-43, 50-52  
 Panton, J., 193  
 Papez, J. W., 106  
 Paranoia: alcoholic, 324; amphetamine use and, 327, 328, 330  
 Paranoid delusions, 47, 146-148; LSD and, 146, 335, 336, 338  
 Parenting behavior: learning of, 293-294, 388, 448; role reversal of, 294-295. *See also* Child abuse; Child development  
 Parents. *See* Child murder; Family murder; Fathers; Mother-child relationships; Mothers  
 Passive aggression, 18, 280, 341  
 Passivity, 39; alcohol and, 322, 323  
 Pastore, N., 348-349  
 Pathological aggression, 25, 26-27, 28, 142-144, 150, 291-292, 368  
 Pathological intoxication, 323-324  
*Patria potestas*, 294  
 Patricide. *See* Family murder  
 Patterson, A. H., 361  
 Patterson, G. R., Littman, R. A., and Bricker, W., 39, 48, 49  
 Pedophilia. *See* Child molestation  
 Penfield, W., and Jasper, H., 111  
 Penis envy theory, 14  
 Penna, M., 412  
 Pepitone, A., and Reichland, G., 347  
 Perceptual flexibility, 21-22  
 Perlin, M., and Sadoff, R. L., 374, 394-403  
 Personality inventories, 143  
 Peters, J. J., and others, 422, 424-425, 434, 435  
 Peters, J. J., and Roether, H. A., 422, 427  
 Philadelphia General Hospital, 422-423  
 Pleasure, lack of, 252-253, 296-297  
 Podolsky, E., 145, 147  
 Poison: alcohol as brain, 115, 121, 146, 325; used in murder, 191  
 Police, and domestic disturbance calls, 248-251; treating violent, 375, 438-445  
 Political climate, and violence, 37-38, 215-218. *See also* Assassins; Warfare  
 Pollack, O., 188, 191, 192  
 Power, 481-482, 486; of institutional authority, 30-31, 364-367, 370  
 Power drives, murder and, 12-13  
 Powers, R. J., and Kutash, I. L., 236, 317-342  
 Preble, E., and Casey, J. J., Jr., 331  
 Pregnancy, 175, 247-248  
 Premorbid personality: alcohol use by, 320-324; amphetamine use and, 327-328; heroin abuse by, 331; of LSD users, 146, 334-335; treatment of, 340-342  
 Prescott, J. W., 252  
 Primary-process material, 25  
 Prisons, 372-373, 378-380, 382-387 *passim*; brutality in simulation of, 368-369; psychologist's role in, 433-436; rape in, 314; reform of conditions in, 385-386; rehabilitative services in, 385-389  
 Projective techniques, 141-143  
 Promotional Aggression Victim Emoto-remotivational Psychotherapy (PAVE Therapy), 453-454, 457-460  
 Property, concept of people as, 294-295, 304  
 Pseudoaggression, 15-16  
 Psychiatric evaluations, techniques of, 135, 138-164, 196-197  
 Psychiatric illness, and rape, 308, 309  
 Psychiatrists, 374, 385-386, 394-403  
 Psychoanalytic theories, 2-3, 7-28, 278-284  
 Psychological factors: in child abuse, 288-298; in female aggression, 274-284; in rape, 308-309

Psychological testing, 141-144  
 Psychopathology, 26-27, 28; of murderers, 142-144, 150; of prisoners, 368  
 Psychopathy, 25; child abuse and, 291-292  
 Psychosurgery, 124-125  
 Psychotherapy: LSD use in, 333, 336; in prisons or forensic institutions, 385-389, 416-418; for victims, 452-461. *See also* Group therapy  
 Public schools. *See* Schools  
 Punishment, 295-299, 379-380, 382, 465  
 Pytkowicz, A. R., and others, 360

## R

Racial tension: murder and, 150; rape and, 306-307, 315  
 Racism, 119-120  
 Rada, R. T., 306, 312  
 Rage behavior, 110-112, 123  
 Rank, O., 13-14  
 Rape, 303-316; alcohol use and, 309; assaultive aspects of, 304-313; cross-cultural studies of, 304, 305, 313-314; group, 305-306, 316; homosexual, 314; interracial, 306-307, 315; in prisons, 314; profile of perpetrators of, 306-312; psychiatric illness and, 308-309; rate of frequency of, 304-305, 315; sexual aspects of, 313-316; societal concern about, 312-313, 470-478; treatment of men who, 311, 313-314, 379, 427-433; victims of, 310-311, 314, 448, 454, 464  
 Ray, J. E., 203  
 Reagan, R., 222  
 Reality testing, 142  
 Rebellion mode, of adaptation, 63, 64  
 Rebellious-rivalrous personality, 200, 202-207, 209, 215  
 Recidivism. *See* Violent offenders  
 Reevy, W., 374-375, 413-437  
 Rehabilitation. *See* Violent offenders

Reich, P., and Hepps, R. B., 47, 146, 335, 336  
 Reich, R., 128-129  
 Reich, W., 448  
 Reinhart, J. M., 311  
 Relative deprivation, 62-63  
 Religion, 483-484, 489  
 Resnick, P. J., 173-175, 193, 195  
 Resnik, H. L. P., and Peters, J. J., 422, 424-425, 426-427  
 Responsibility, concept of, 490-492  
 Retaliation, risks of, 30  
 Retreatism, 64, 65  
 Retribution. *See* Violent offenders  
 Revitch, E., 139-140, 149, 154, 161, 165  
 Revitch, E., and Schlesinger, L. B., 135, 138-164, 165  
 Revolutions, 44, 217  
 Richardson, L. F., 68  
 Riots, 118-119  
 Ritualism, as adaptation mode, 63-64  
 Ritualized animal behavior, 5, 77-78, 79-80, 81, 89-92  
 Robbery, 310  
 Rodin, E. A., 122-123  
 Roebuck, J., and Johnson, R., 321  
 Roger, A., and Dongier, S., 110  
 Rorschach perceptions, 141-143, 148-149  
 Rosenblatt, E., and Greenland, C., 192  
 Rosvold, H. E., Mirsky, A. F., and Pribram, K. H., 107  
 Roth, Sir M., 129-130  
 Rothaus, P., and Worchel, P., 349  
 Rothstein, D., 203-204  
 Ruby, J., 203, 395  
 Ruotolo, A., 155  
 Rush, B., 320

## S

Sabini, J., 236-237, 343-370  
 Sabini, J., and Silver, M., 369  
 Sabotage. *See* Vandalism  
 Sadistic behavior, 9, 10-11, 16  
 Sadoff, R. L., 138, 178, 398, 403  
 Salamanders, 103  
 Samuels, W., 469

- Satten, J., Menninger, K. A., and Mayman, M., 142, 155  
 Sawa, M., and others, 111  
 Sayed, Z., Lewis, S., and Brittain, R., 141  
 Schachter, S., and Singer, J., 352-354, 361  
 Schaller, G. B., 99-100  
 Scherer, K. R., Abeles, R. P., and Fischer, C. S., 69, 70, 71  
 Schizophrenia, 27, 387, 483; ambulatory, 24-25; amphetamine use and, 327-328; LSD and, 334-335; and rapists, 309  
 Schlossberg, H., 375, 438-445  
 Schools: functions and goals of, 263-264, 493; learning difficulties and violence in, 387-388; physical punishment in, 295; violence in, 235, 254-266, 295, 387-388  
 Schuster, R. H., 4-5, 74-100  
 Schwade, E. D., and Geiger, S. G., 141  
 Schwade, E. D., and Otto, O., 141  
 Sears, R. R., Maccoby, E. E., and Levin, H., 50, 295, 482  
 Secret Service, 200-201, 217-218  
 Sedative drugs, 318  
 Sedgwick, P., 127  
 Self-assertion, 27  
 Sellin, T., 117  
 Sennett, R., and Cobb, J., 265  
 Serber, M., 414-416  
 Sex crimes. *See* Child molestation; Murder; Rape; Sexual offenders  
 Sex differences, 272-284; in standards for mental health, 187-190, 193-196, 267-268, 282-283  
 Sex role models, 191-192  
 Sex role stereotypes, 274-275, 277, 279-280, 283  
 Sexism, 187-190, 193-195, 196, 267-268, 272-283  
 Sexual behavior, of animals, 77, 80, 82-86, 105  
 Sexual drive (Freud), 8-11  
 Sexual identity, 270-271, 272-278, 281-282  
 Sexual inhibition, 23-24  
 Sexual offenders, 25, 51, 155-158, 236, 301-316, 352, 375, 426-427; recidivism of, 391; treatment programs for, 374-375, 386, 413-437. *See also* Child abuse; Child molestation; Murder; Rape  
 Shadoan, G., 400  
 Shakespeare, W., 189  
 Shame aversion therapy, 416  
 Shearer, L., 200  
 Sherrington, Sir C., 103  
 Short, J. F., 35, 43, 67, 222-223  
 Shupe, L. M., 324  
 Siblings: family position, and style of aggression of, 203-208; murder by, 175-176, 245; rivalry of, 12-13, 176  
 Siegfried, J., and Ben-Shmuel, A., 112  
 Sigal, J. J., and others, 447  
 Singer, D. L., 360  
 Singer, J. D., and Small, M., 226, 229  
 Singer, J. L., 8, 11  
 Sirhan, S., 203  
 Situational Aggression Victim Emoto-restorative Psychotherapy (SAVE Therapy), 452-453, 455, 456, 457  
 Smith, S. M., Hanson, R., and Noble, S., 291  
 Smith, S. M., Honigsberger, L., and Smith, C. A., 291  
 Snow, C. P., 46  
 Sobel, E., 235-236, 267-284  
 Social conflict, 19, 30-31  
 Social control, 46-47, 468-469. *See also* Obedient aggression; Prisons; Warfare  
 Social learning. *See* Learning  
 Social-political climate, 215-218  
 Social systems, 4, 68-71; animal, 81-89, 93  
 Socialization, 240, 253, 256-258, 273-278  
 Sociobiological theories, 101-116; critics of, 120-132  
 Sociological theories, 4, 58-73, 116-120, 121, 272-274  
 Sociopathy, child abuse and, 291  
 Sodomy, 303

Somnambulism, and murder, 145  
 Spatial ability, 275-276  
 Species-specific behaviors, 5, 76, 78, 80, 86-87, 89, 98, 100  
 Speech disorders, 181, 185  
 Speigel, J. P., 118  
 Sports, competitive, 66, 361  
 State, the: legitimized violence and murder by, 136-137, 182-183, 219-232, 465-467. *See also* Prisons; Warfare  
 Steele, B. F., 236, 285-300  
 Steinmetz, S. K., and Straus, M. A., 247, 299  
 Stevens, J. R., 123-124  
 Stimulant drugs, 146, 318. *See also* Amphetamines  
 Stinchcomb, A. L., 263  
 Stollar, R. J., 270-271, 281-282  
 Straus, M. A., 252  
 Street crime, 150  
 Stricker, G., 267, 277  
 Strickland, L. H., Jones, E. E., and Smith, W. P., 347  
 Stürup, G. K., 303, 311, 314  
 Stykes, G. M., and Matza, D., 65  
 Subcultures, 34-35, 43, 64-67, 119-120, 190, 246-248, 251-253; student, 256-266  
 Substance-induced aggression, 236, 317-342. *See also* Alcohol; Amphetamines; Drugs; Heroin; Lysergic acid diethylamide (LSD)  
 Suffering, 42-43, 50-52  
 Suicide, 155, 167; by children/adolescents, 178; infanticide accompanied by, 174, 175; following murder, 173-175; LSD and, 333, 334; thoughts of, preceding murder, 157, 161, 163, 167, 169; victim-precipitated murder as, 179  
 Sullivan, H. S., 14-15  
 Superego, 19-20, 25, 483-484, 485, 487  
 Survivor syndrome, 447, 448, 456  
 Sutherland, E. H., 64, 150  
 Switzerland, 262-263  
 Symbolic modeling influences, 35-38  
 Szasz, T., 125, 127, 128

## T

Tamerin, J., and Mendelson, J. H., 321  
 Tanay, E., 144-145, 161, 184  
 Taylor, S. P., and Gammon, C. B., 324  
 Teachers, 257-258, 260  
 Television, 35-36, 117-118  
 Territoriality, 82-86, 87, 315  
 Testosterone, 268-270, 276  
 Thematic Apperception Test (TAT), 17, 142-143  
 Theoretical viewpoints, 2-132; ethological, 4-5, 74-100, 271-272; learning and behavioral, 3-4, 29-57; psychoanalytic, 2-3, 7-28, 278-284; sociobiological, 101-116, 120-132; sociological, 4, 58-73, 116-120, 121  
 Theory (defined), 59-60  
 Thirty Years' War, 150  
 Thompson, C., 278  
 Thrasher, F. M., 64  
 Tinbergen, N., 79  
 Tinklenberg, J. R., 146, 322, 329, 333, 334  
 Toch, H., 43  
 Toilet training, 486-487  
 Tranquilizers, 318, 412  
 Treatment, 372-374, 377-393; of drug abusers, 339-342; of family murderers, 186; use of drugs in, 381, 392, 411-412  
 Tripp, C. A., 414  
 Trust, lack of, and child abuse, 297  
 Turner, C. W., and Simons, L. S., 359  
 Turner, E., 112  
 Turner's syndrome, 270  
 Tyrannicide, 199, 211

## U

Uehling, H. F., 421  
 Ulrich, R. E., 42, 43  
 Ungerleider, J. T., and others, 336  
 Urban riots, 118-119  
 Ursin, H., 107

## V

Vaernet, K., 108, 126-127

- Vaernet, K., and Madsen, A., 112  
 Valenstein, E. S., 120-121  
 Vandalism, in schools, 255, 261, 265  
 Varma, I., and Jha, B., 140  
 Verbal threats, 43  
 Veterans, and violence, 230-231  
 Victimology, 375, 446-461; basic vocabulary of, 449; classification of, 449-452; history of science of, 446-449; treatment methods of, 452-461  
 Victims, 55-56; of child abuse, 293-294, 388, 447-448, 455, 456-457; masochism of, 448-449; of murder, 172-173, 179, 447; of rape, 310-311, 314, 448, 454, 464; secondary, 454; status of, 464; students as, 256-257; treatment approaches for, 375, 446-461  
 Vietnam War, 150, 219-221, 262, 363, 466; rape during, 312; rates for U.S. murder during, 225; veterans of, 230-231  
 Violence: automobile-alcohol, 115; and brain function, 5-6, 104-106, 180-181; children's learning of, 179-183, 293-294, 298-300, 388, 448; collective, 4, 30, 36-38, 45, 216-217; cultural dimensions of, 33, 191-192, 240-241, 246-247, 262-263, 272, 304, 305, 313-314; definitions of, 61, 132, 222-223, 376, 463-468; delusions inciting, 47, 146-148, 335, 336, 338; drug associated (*see* Drugs); expressive, 65; family (*see* Family violence); instrumental, 16, 26, 51-52, 60, 65, 345-346, 369; legitimization of, 61, 219-232, 239-240, 466; mass media's role in, 35-36, 117-118; pleasure, lack of, and, 252, 253, 296-297; political, 37-38, 215-218; predicting future, 373-374, 382-383, 389-392; prevention of, 375-376, 480-493; psychodynamics of, 27-28, 135-136; psychopathology and, 26-27, 28, 142-144, 150; rates of postwar, 225-232; in the schools, 235, 254-266, 295, 387-388; society's role in, 4, 31, 68-71, 376, 462-479; sociobiological theories of, 101-116, 120-132; sociological theories of, 4, 58-73, 116-120, 121, 272-274; in sports, 66, 361; by the state, 136-137, 182-183, 219-232, 465-467; subcultures of, 34-35, 43, 64-67, 119-120, 190, 246-248, 251-253, 467-468; theoretical viewpoints on, 2-132; treatment versus correction of, 372-374, 377-393; typology of, 390-392. *See also* Aggression; Child abuse; Murder; Rape; Victims; Warfare  
 Violent offenders: age of, 391; civil rights of, 383, 386-387, 392-393; clinician's taking the history of, 406-407; correction or treatment approaches to, 372-374, 377-378, 407-411; deterrence of, 372-373, 378-380, 382-387 *passim*; emergency treatment of, 405-406; ethics of rehabilitation of, 381, 392-393; incapacitation of, 372-373, 378, 384, 385; mental illness of, 374, 386, 387, 391-392, 394-403; preventing recidivism of, 314, 373-374, 381-383, 389-392; rehabilitation of, 372-374, 380-393; 407-411; release dates for, determination of, 389-392; retribution against, 380, 382, 384, 385, 389-390; treatment of, 372-375, 377-393, 404-412. *See also* Assassins; Murderers; Sexual offenders  
 Virkkunen, M., 326  
 Voluntary groups, 489  
 Von Hentig, H., 446  
 Voss, H. L., and Hepburn, J. R., 320  
 Voyeurism, 302
- W
- Waldorf, D., 332, 333  
 Walker, A. E., 111, 125-126  
 Walker, A. E., and Blumer, D., 111, 126  
 Warfare, 25-26, 30-31, 35, 47, 49,

- 118, 219-224, 236, 363, 466; comparative national participation in, 226-232; military training for, 25-26, 35; mortality caused by, 219, 220, 229; murder rate increases after, 225-232; rape during, 312-313; veterans of, 230-231. *See also* Nazi atrocities; Thirty Years' War; Vietnam War
- Washington (state), Sexual Offender Project of, 416-418, 421, 423, 426
- We-ego, 488-489
- Weapons, 96, 192, 246, 359
- Weber, M., 465
- Wechsler Adult Intelligence Scale, 142
- Weinstein, E., and Malitz, S., 140
- Weiss, J. M. A., and others, 155
- Werner, A., 448
- Wertham, F., 117, 135, 154, 165-170
- Western Washington State Hospital, 416-418, 421, 423, 426
- Wheeler, L., and Caggiula, A. R., 43, 362
- Wheeler, L., and Smith, S., 362
- Whiting, B. B., and Pope, C. P., 272
- Wildebeest, 91, 93
- Williams, J., 270, 273, 275
- Wilson, E. O., 81, 82, 88, 92, 315
- Wilson, F., 210-212
- Wilson, R., 130
- Wimpfheimer, M., and Schafer, R., 279
- Winnicott, D., 15
- Wisconsin, Sex Crimes Program of, 418-422, 423, 426
- Witte, A., 383
- Wives: abuse of, 304, 470-472, 475-478; murder of husbands by, 178-179, 192, 242-246
- Wolfgang, M. E., 179, 184, 192, 222, 234-235, 238-253, 320, 390, 447
- Wolfgang, M. E., and Ferracuti, F., 35, 65, 119, 190, 241, 247, 248-250
- Wolman, B. B., 376, 480-493
- Women: hostility toward (*see* Rape); psychological theories about, 193-195, 196, 235-236, 241, 274-284; sexist standards for mental health of, 193-194, 277, 282-283. *See also* Female aggression; Mothers; Wives
- Women murderers, 136, 140, 187-197; age of, 192-193; of their children, 140, 173-175, 192, 195-196; of their husbands, 178-179, 192, 242-246; mental health of, 187-190, 193-195, 196, 277, 282-283; psychodynamic patterns of, 192, 196-197. *See also* Child abuse; Family murder; Female aggression
- Wood, C. D., 107
- Wright, M. E., 57
- Writers, 207-208
- Wyndham, Sir C., 210
- Y
- Yablonsky, L., 119
- Young, L., 286, 447
- Z
- Zillmann, D., 40, 354
- Zillmann, D., and Bryant, J., 355-356
- Zillmann, D., and Cantor, J. R., 356-357
- Zillman, D., and others, 353-357
- Zimbardo, P., 367-369
- Zoroastrianism, 491-492
- Zucker, L. J., 21