Aggression; a Paradoxical pathology of the mind.
By Deus Kitapondya -MD2 2006/07 MUHAS

Psychologically aggression is defined as any purpose physical or verbal that is intended to harm or destroy. It can also be regarded as a strong and vigorous pursuit of preservation to satisfy needs, the latter explanation is more applicable for animals which in most cases become aggressive when are deprived of their needs or if they encounter or face dangers. The former definition precisely applies for human being who under undefined circumstances can be aggressive and may lead to destruction of material or life. Human being harbours two opposite (inherent drives) acting internal drives, which are always at equilibrium under normal psychological and body physiological states. These are (the Thanato drive) the death instinct which is destructive and (the Eros drive) the life instinct which is constructive. Aggression ensues when the death instinct is dominant over its counterpart, and sets out various manifestations, which are simply termed as violence. It is termed as a mental disorder that may manifest at an individual family, community or society level. The term mental disorder is a misnomer as aggression is subjective and culture dependent, meaning one behaviour may be regarded aggressive in person or community but quite normal and reinforced in another person or culture.

Females are more aggressive verbally and males are more physically, it also varies from generation to another and is technologically dependent. The technological dependency is obvious as life challenges and civilization varies from time to time. Poor people and religious extremists are more likely to be aggressive than their counterparts respectively. Aggressive behaviour goes far to encompass all forms of violent acts, e.g. sexual abuse, domestic abuse, insults, vigorous and severe punishments, criminality etc.

There are three recognized aspects where aggressive behaviour stems; however, it should be noted that the absolute cause is obscure but a web of factors exits, as explained below.

**Biological**. Biology reveals that the human body is like a potential volcano or bomb that may erupt at any time unpredictably, aggressive behaviour operates in our biological systems. Any person may be aggressive since we are all born inert or dormant but we become modified by life atmosphere. Three biological centres are known to elicit an aggressive response if they are disturbed.

**Genetic centre.** Genes engineer our perceptive behaviour, they direct the natural manifestation of our response. They are the source and engines of our physiological, psychological and physical outlook. They are hardly modified by physical environment, and socio-cultural atmosphere. This is evidenced by the behaviour of identical twins, if one twin is aggressive then the likelihood of the other twin is high, this differs from fraternal or normal siblings who have farther similarities. Supermales, with a XXY genotype are known to be aggressive, though not all is convincing evidence.

**Neural centre.** The brain is known to have a violent centre, although the exact site in the brain is not clearly ascertained. (Limbic system?) This can be realized in patients with organic mental disorder e.g. schizophrenia. The fact that there is a great likelihood of a person with mental disorder to act aggressively either physically or verbally than a normal one although not all schizophrenic patients are aggressive or violent.

**Biochemical homeostasis.** Hormones, alcohol, drugs and other variety of metabolite in the body, can influence or disturb body equilibrium essentially the neural system which is the focus of human psyche. This can be substantiated by loss of rage of a bull and male mice when castrated. Experiment to castrate human beings is unethical, and has never been carried out. However, hormone testosterone has been...
incriminated to be a central player in eliciting rage in these animals. In human most violent criminals tend to muscular young male, with lower than average intelligent scores, decreased level of neurotransmitter serotonin and a high testosterone level these features are not restricted to violent individuals, they may also be found in many other people like players soldiers. Alcohol and drugs disturbs the body homeostasis, making the victim more prone to violent act. An aggressive person is prone to alcohol and drugs and alcoholic or drug user is likely to be aggressive (double-edged sword).

**Psychological**, Subjection to aversive events for long time good example prejudice, threats, abuse, wars, creates mind trauma, which brings frustration and this begets reaction and anger which finally release violence. It is said that those who made miserable often make other miserable too. Stress and physical pain elicits anger and hence aggressive behaviour, consider about suicide which is a self-directed aggression death or destructive drive.

**Socio-cultural**, Behaviour of aggression is regarded as a learned experience, young children who are born in a pathological family or community are likely to inherit the aggressive behaviours, from their parents, or guardians or from peer groups. For instance we kill people who kill other people to show that killing is an abomination and wrong (burning thieves or bandits). They see their father punishing their mother severely and aggressively. Elders are the role model or architect of the behaviours of their children. Economic discrepancy among people in a society, extreme poverty and slum dwellings are harbingers of aggressive behaviours and violence. Some aggressive related behaviour may be accepted in other society because people attach to belief; they learn and find them beneficial.

Understanding the Causes, the root, the extent and variation of aggressive behaviour today is of paramount to the judicial system, the religious people, social activists, humanitarians, psychologists and importantly health professionals. This is because; the society is now a mere jungle. People are more vibrant and violent than ever before in human history. Little or no research is done especially in developing countries, to evaluate the effect and consequences of aggressive behaviours. However in it is said that aggression is among the top five causes of morbidity and mortality, it actually an aspect of public health importance and it should be placed top on the national agenda on health. Prevention of aggression should be multi-sectorial and in three dimensional consideration, legal and punishment are no more helpful, psychologists, religious people and health professionals in combination can be complements to reduce its impact to health burden.

**References:**

- Freud Sigmund: *The complete introductory lectures on psychoanalysis*, 1971
- John W. Santrock: *Psychology*, pg, 676.