

OVERCOMING OF AGGRESSIVE BEHAVIOR OF PRIMARY SCHOOL CHILDREN THROUGH FAIRY TALE THERAPY

Abstract

The article provides definitions of aggression, the causes of its occurrence, as well as fairy tale therapy as a means of overcoming aggressive manifestations. A research was conducted to study the psychological characteristics of the aggressive behaviour of younger schoolchildren. The formative linear experiment was used. The method for diagnosing aggression Bass-Darky and Rosenzweig's test of measuring the aggressiveness were carried out. In the aggressive behavior of primary school children is dominated by negative and indirect aggression; verbal and physical aggression are moderately manifested; auto-aggression, insult and suspicion are weakly expressed. More than half of primary schoolchildren have a high level of aggressiveness. In the vast majority of pupils, aggressive reactions are directed to the environment, that is, the orientation of aggression is extrapunitive. In about a quarter of pupils, the orientation of aggression is impunitive, for what happened they attribute the blame to the situation. The weakest expression has the intrapunitive orientation of aggression, when the child considers himself responsible for the event. To overcome the aggressive manifestations of primary schoolchildren, a training program was used, in which therapeutic tales and training exercises were included. If before applying a training program for overcoming aggressiveness, aggressive reactions of most younger schoolchildren were directed at others, and they considered others to be responsible for solving the problem, then after implementing the training program the results of the retest show that there has been a sharp increase in the rate of intrapunitive aggression. That is, children began to count, that the solution of the problem depends more on the person, and in case of failure, the person should blame not the other, but own identity. Therapeutic fairy tales are an effective way to overcome the aggressive behaviour of children in educational institutions.

Keywords: *primary schoolchildren; aggressive behaviour; extrapunitive, intrapunitive and impunitive aggression; fairy tale therapy; training program.*

Introduction

A comprehensive analysis of the aggressive behaviour of children is a severe psychological, social and pedagogical problem. Aggression is targeted, destructive behaviour that contradicts existing norms and rules in society. Aggression involves actions that cause the destruction of living or nonliving objects. The term "aggression" is divided as a form of behaviour and "aggressiveness" as a person's mental state. As synonyms for the term "aggression", the terms "incontinence", "cruelty" and "destructiveness" are used (Levitov N., 2005).

The earliest theoretical approach to aggression was presented by Z. Freud (1920), who considers aggressive behaviour to be innate (Frejd Z., 2001). In his works, K. Lorenz (1964, 1966) argues that aggressive behavior begins with an instinct aimed at fighting for survival. N. Levitov describes a state of aggression as a feeling of anger, caused by a loss of self-control (Levitov N., 1967). A. Bass put forward the concept of institutional and hostile aggression (Bass A., 1967).

E. Fromm interprets the term "aggression" as an action that damages or intends to harm an animal, person, group of people or some inanimate object (Fromm, E., 2007).

R. A. Baron and D. R. Richardson believe that aggression, regardless of its form of manifestation, is a behavior that is meant to harm another living organism. In addition, the damage caused by aggression is intentional, purposeful (Robert A. Baron, Deborah R. Richardson, 2004).

Aggression involves various actions. When people describe someone who is aggressive, they say that he is unfriendly, usually insults others, tries to achieve his goals in all possible ways, regardless of the harmfulness of the means used (Dubinko N., 2010).

From the above definitions, it follows that aggression should be considered as a model of behaviour, and not an emotion, motive or attitude. However, the term "aggression" is often associated with negative emotions, such as anger, insult or a desire to cause harm, and even with negative attitudes, such as racial or ethnic prejudices. Despite the fact that these factors play an essential role in the formation of aggressive behaviour, this is not a prerequisite for the formation of a behaviour model. For example, anger is not a prerequisite for attacking anyone. It is also not at all necessary for the aggressor to hate or not sympathize with the person to whom his actions are directed (Nemov R., 2003).

According to A. Rean, aggression is a motivated behaviour by which damage is caused to another object or people causing discomfort, stress, depression (Rean,

A.,1999).

D. Dollard believes that a frustrated state is a stimulus for the manifestation of aggression. N. Miller proposed a particular model of aggressive behaviour, according to which a person shows aggression not against his frustrators, but against others (Dollard J., Miller A.,1939). In the theory of A. Bandura, aggression is considered a form of behaviour that is absorbed in the process of social learning (Bandura A., 2002). In addition to social factors affecting the manifestation of aggressive behaviour, genetic predisposition should also be taken into account (Randy J. Nelson, 2006). L. Berkowitz points to the importance of the emotional and cognitive processes that underlie aggressive behaviour (Berkovic L., 2002).

Aggression can be considered not only as behaviour but also as a mental state consisting of 3 components: cognitive, emotional and volitional components. The cognitive component is indicative, implies an understanding and assessment of the situation.

Lazarus considers threat as the primary motivator of aggression and believes that threat causes stress, and the person reacts to stress through aggression. However, not every threat causes aggression, and, on the other hand, an aggressive state is not always caused by threats (Dubinko N., 2010).

In the emotional component, anger is allocated for firstly. Passing through each stage of an aggressive state - preparation, execution of the process and evaluation of results, a person experiences intense anger, which sometimes turns into an affect. The emotional aspect of aggression is not limited to anger or hatred. This situation is also characterized by ill will, a delight from the sufferings of others, excessive self-confidence. It also happens that the aggressor receives positive emotions from his actions: the pathological manifestation of this is sadism (Dubinko N., 2005).

The aggressive state often arises and develops in a struggle, and any struggle, as a rule, requires the presence of strong volitional qualities. The strong-willed component, as part of the aggressive state, is manifested in purposefulness, perseverance, decisiveness, initiative and courage (Lorenc K., 2007).

Social factors - events and incidents with which a person is faced have a great influence on the manifestation of aggression. Resisting social factors creates the appropriate conditions for the manifestation of aggression (Randy J. Nelson, 2006).

According to O. Shelopukho, aggression can be viewed as a desire to harm someone. Aggression is manifested both in aggressive actions and in aggressive thoughts and intentions (Shelopukho O. 2009).

The reasons that are incentives for aggressive behaviour are real events, and their awareness is crucial because, in the case of denial, it is impossible to take psychocorrection.

Causes of aggressive behaviour are divided into 3 subgroups:

- organic causes are brain injuries; brain dysfunction,
- hereditary causes - affective-irritating behaviour of parents or relatives; anxiety and hyperactivity in a child,
- social causes - aggressive behaviour of family members; inconsistency of parents in learning the norms and laws; unreasonable, strict supervision of children by parents; domestic violence cases; parental conflict; child indifference; conflicts with classmates; incompetent teacher approach; curriculum overload; situational causes (mutual aggression; high sensitivity to the assessment; situations that cause stress to the child) (Levitov N., 1967).

Thus, aggression is an act the purpose of which is to harm another. Aggression makes certain changes to the object of application, not taking into account his desire. Aggression can be spontaneous or planned.

In the presence of various kinds of psychological problems, the use of fairy-tale therapy is effective in young children. The child identifies himself with the hero of the tale, as a result of which the perception and modelling of this character allows him to learn how to resolve the conflict, acquire new skills and abilities (2018).

Fairy tale therapy uses the resources of the fairy tale to solve a number of issues - educational, developmental, enlightening. Fairy tales accompany a person throughout life. Therefore, fairy tale therapy has no age limit (Tkach R., 2008).

Familiarity with fairy tales helps younger pupils to understand the surrounding reality. Any fairy tale tells about the relations of people, about the norms and laws that operate around us. In fairy tales for children, interesting characters are offered, and essential information is acquired over time, imperceptibly. Fairy tales are ready-made behavioural models that offer solutions to some of the most complex problems and at the same time, provide an opportunity to think for yourself, imagine (Vachkov I., 2007).

In order to study the psychological features of aggressive behaviour of younger pupils, as well as the overcome of aggressive behaviour through fairy tale therapy, in January-March 2018, a study was conducted in the Mets Ayrum secondary school in the Lori region of the Republic of Armenia.

The sample consisted of 40 pupils aged 8-10 years - 20 boys and 20 girls. The study was conducted in 3 stages. The formative linear experiment was applied.

A linear experiment is carried out without control groups and is based on a comparison of the state of controlled and dependent variables before and after experimental exposure. It differs in that the same group is subjected to analysis, which is both the control (its initial state) and experimental (its state after changing one or more characteristics) (Classification of Experiments, 2019).

In our study the controlled (independent) variables of the experiment were therapeutic tales and training exercises aimed at overcoming the aggressiveness, while the dependent variables were the level and direction of the aggressiveness of younger schoolchildren. At the first stage of the study, the method of diagnosing aggression of Bass-Darky and the method of measuring the aggressiveness of Rosenzweig were used. The second stage were included fairy tale therapy and training exercises. At the third stage retesting was carried out.

At the first stage of the study, the following results were obtained. According to the Bass-Darki method of diagnosing aggression, of the types of aggression among younger schoolchildren, negativism (25%) and indirect aggression (20%) were most pronounced. Negativism is expressed by children in the form of oppositional behaviour directed against the reputation of another. Negativism from passive resistance can grow into active actions, demands, orders. Indirect aggression manifests itself in the form of tapping with feet, evil jokes, gossip and anger episodes. A comparative analysis of girls and boys shows that negativity is more typical for boys (40%), and indirect aggression - for girls (also 40%).

24% of junior schoolchildren have average manifestations of verbal and physical aggression. Verbal aggression is expressed in the form of a dispute, noise, screams, curses, threats, and physical aggression – in the form of the desire to hurt, harm others.

The least common types of aggression among younger schoolchildren are irritation (8%), insult (8%), auto-aggression (8%) and suspicion (4%). Irritated children are prone to arousal at the slightest occasion, the expression of rude and harsh phrases. Insult as a form of manifestation of aggression is due to anger, feelings of dissatisfaction and presupposes the existence of envy, hatred towards the environment. Auto-aggression is expressed through harmful, evil, or ruthless actions against oneself. And suspicion is accompanied by distrust and caution, and at the same time, the installation is such that the people around are predisposed to cause harm.

Data from the method of measuring the aggressiveness of Rosenzweig show that 56% of primary school children have a high degree of aggressiveness, 28% - a moderate degree and 16% - a low degree.

In 68% of children, the direction of aggression is extrapunitive, that is, their aggressive counteracting is directed at the environment, the cause of frustration is considered different, and it is he who is responsible for solving the problem. In 4% of the group studied, the direction of aggression is intropunitive, that is, the accusation is addressed to itself, the solution of the problem, according to the child, also depends on its own "I". In 28% of the sample, the direction of aggression is impunitive, that is, the blame is attributed to the situation, and the aggression is not directed at the people around.

Thus, according to the results of the first stage of the study, the level of aggressiveness of the majority of the younger schoolchildren examined is high, at this age of the types of aggression the negativism and indirect aggression are most pronounced, and the direction of aggression is mainly extrapunitive. At the second stage of the study, training program (Vachkov I., 2007) (2018b) aimed at overcoming aggressive behaviour was developed and implemented, which included training exercises and therapeutic fairy tales by O. V. Khukhlayeva, O. E. Khukhlayev, I. V. Vachkov, E S. Mosina, N. N. Kashtanova.

The purpose of the training program is to create conditions for maintaining and strengthening the psychological health of students through psychological correction of aggressive tendencies in behavior, for learning adaptive behavior skills.

The following tasks were encountered during the training:

- Stimulate the verbalization of children attitudes towards aggressive situations.
- To educate children in ways of self-control - to develop the ability to respond to aggressive influences.
- To analyze the change in the attitude of children on the situation of aggressive influence.
- To train in the skills of recognition of emotions and feelings, control of self emotional state.
- To optimize the child's communication with peers through the development of mechanisms of empathy and trust in each other and surrounding people, develop the ability to interact, reckon with others, and jointly solve tasks.
- Create a positive emotional background in various types of student activities, relieve emotional stress in the interaction between themselves.

Children with both high and low levels of aggression participated in training program since it was inappropriate to include only children with a high level of aggression in the group.

This stage lasted two weeks. Classes were held twice a week. Each meeting began with a welcoming speech, followed by activating and training exercises, and then - the presentation of a therapeutic fairy tale and its joint discussion with members of the group. During the meetings, the planned exercise sequence schedule changed depending on the level of activity of the children.

During the practical use of fairy tale therapy, the authors concluded that fairy tales have a positive impact on the cognitive, emotional, and behavioral spheres of children and develop empathic abilities in children.

At the second stage of the study, children were conditionally divided into two groups - children with active behavior and children with passive behavior. Active were considered those children who, during fairy tale therapy, were involved in discussions, actively expressed their opinions, and also during classes were distinguished by their mobility and impulsivity. Those children were considered passive who could hardly express their opinions, were not initiative, rarely participated in discussions, were shy about expressing their own thoughts, but, on the other hand, they listened carefully to fairy tales and drew appropriate conclusions for themselves.

Combining the indicators of the first and second stages of the study, it became apparent that physical and verbal aggression (according to the Bass-Darky test) dominated in children with active behaviour, and insult and negativism in children with passive behaviour.

At the third stage of the study, retesting was carried out to determine the effectiveness of a linear formative experiment, that is, to measure the directionality and the level of aggressiveness. Tests carried out at the first stage of the study were re-applied after carrying out fairy tale therapy. The data from the Bass-Darka retesting showed that the manifestations of aggression decreased, in particular, the indicators of physical, verbal and indirect aggression, negativism, insult, auto-aggression significantly decreased. Suspicion and irritation of some students decreased, some remained at the same level.

The results of retesting the Rosenzweig's method of measuring aggressiveness are as follows: if, before fairy tale therapy, aggression in 68% of primary school children had an extrapunitive orientation, then after fairy tale therapy the extrapunitive orientation of aggression had decreased to 36%. The intropunitive orientation of aggression before fairy tale therapy was found in 4% of children, and after in 40%. The impunitive orientation of aggression was initially observed in 28% of children and in 24% after fairy tale therapy, that is, manifestations of impunitive orientation have not changed much

before and after the experiment.

The data of the first and third stages of the study, according to the method of Rosen Zweig, are presented in the diagrams (see Diagram 1 and Diagram 2).

Diagram 1

The focus of aggression before fairy tale therapy

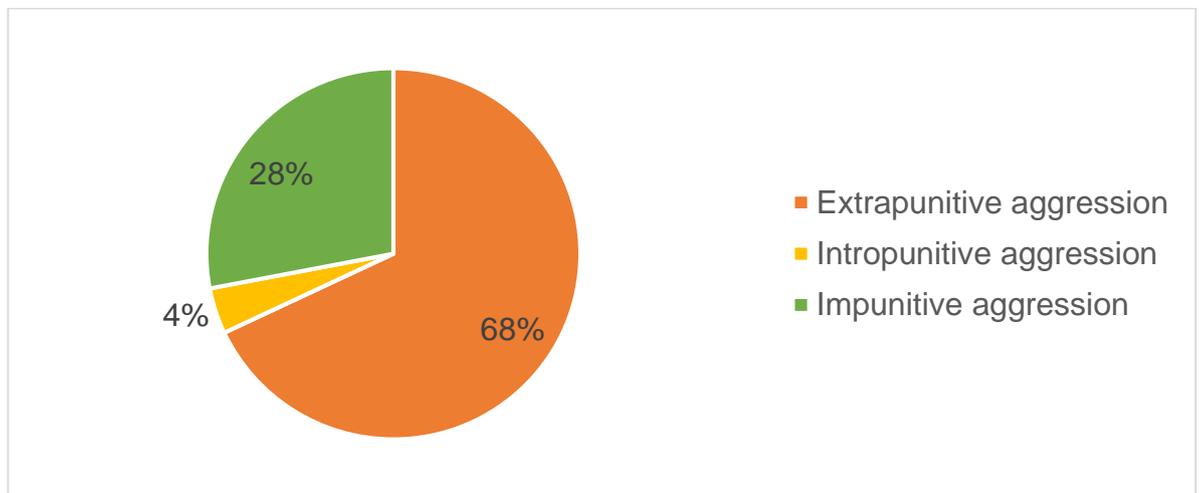
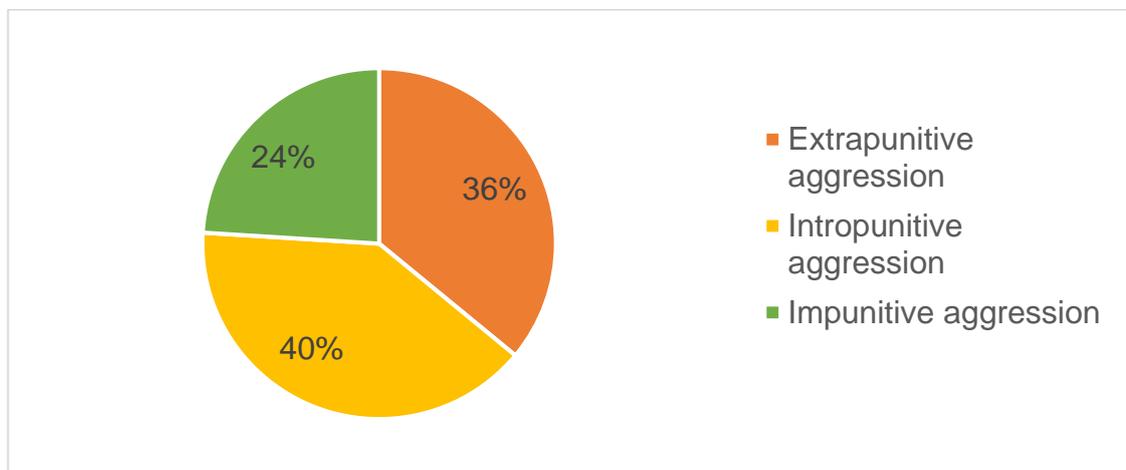


Diagram 2

The focus of aggression after fairy tale therapy



The results show that the level of aggression after fairy tale therapy has decreased, and this indicates an effectiveness of the formative linear experiment.

So, summing up the research data, we can draw the following conclusions.

- In the aggressive behavior of primary school children is dominated by negative and indirect aggression, verbal and physical aggression are moderately manifested, auto-aggression, insult and suspicion are weakly expressed.

- More than half of primary schoolchildren have a high level of aggressiveness. In the vast majority of pupils, aggressive reactions are directed to the environment, that is,

the orientation of aggression is extra punitive. In about a quarter of pupils, the orientation of aggression is imp unitive, for what happened they attribute the blame to the situation. The weakest expression has the intropunitive orientation of aggression, when the child considers himself responsible for the event.

- If before applying a training program for overcoming aggressiveness, aggressive reactions of most younger schoolchildren were directed at others, and they considered others to be responsible for solving the problem, then after implementing the training program the results of the retest show that there has been a sharp increase in the rate of intropunitive aggression. That is, children began to count, that the solution of the problem depends more on the person, and in case of failure, the person should blame not the other, but own identity.

- The fairy tale therapy contribute to reduce the level of aggressiveness of younger pupils, to reduce extra punitive and to increase intropunitive manifestations of aggressiveness.

- Therapeutic fairy tales are an effective way to overcome the aggressive behavior of children in educational institutions. They can be used by psychologists, teachers, parents. The training program proposed by the authors has been implemented in secondary school for use by teachers and psychologists in the future.

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