



ANTISOCIAL BEHAVIOURS IN ADOLESCENCE AND DEVELOPMENTAL PSYCHOLOGY: A REVIEW

Alice Murteira Morgado, Maria da Luz Vale-Dias

alicemmorgado@gmail.com

University of Coimbra

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ABSTRACT

In this paper we present a review on developmental literature regarding antisocial behaviours in adolescence. We begin by identifying some of the peculiarities of the antisocial phenomenon in this very unique stage of development, that characterize its particular complexity. After that, we focus on several individual variables that undergo considerable development during this stage of life and that may play an important role in the adoption of risk behaviours in adolescence. In particular, psychosocial competence, personality, self-concept, and intelligence are approached. We conclude that, though many dimensions of the antisocial phenomenon are already addressed in exiting literature, several issues still lack enlightenment in order to reach further and more profound knowledge that allows theory and practice to develop and improve.

Keywords: antisocial, behaviour, risk factors, adolescence, development.

INTRODUCTION

It is rather consensual that the concept of antisocial behaviours is a socially determined construct that includes many different subtypes, levels of destructiveness, forms, functions, onsets and pathways. For such reason, the identification of antisocial behaviours, especially in adolescence, is defined by a high level of uncertainty.

Coming from a developmental framework we envision adolescence as a stage of life characterized by the emergence of new abilities in a transformative and integrative process that allows the individuals to adapt to the environment and to themselves. Hence, in order to understand the antisocial act we need to understand at what point in the individual's life did it occur, how was it origi-

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nated, and what pathways (i.e. persistence or desistence, more or less severe antisocial behaviours) did the individual follow before and after.

The challenges of studying adolescent antisocial behaviours within a developmental framework are considerable, not only because the manifestations of such behaviours present great variability from individual to individual, but also because the very concept of antisocial act, its classification and level of maladjustment involved may have distinct definitions according to different cultural standards. Besides, some antisocial behaviours are regarded as *normative* for some groups of individuals, even in societies where they are disapproved. We equally need to account for the motivations and levels of pathology behind such behaviours specifically at a developmental stage when behaviours may be motivated by a multitude of factors, some of which do not necessarily involve pathology or intent to harm. Finally, and despite being a serious social and public health matter, as most acts are not formally reported to health or legal entities, antisocial behaviour before adulthood is quite difficult to quantify.

In light of such challenges, it is fundamental to acknowledge what is known about the antisocial phenomenon in adolescence but also, and above all, what is still unknown, so that we can seek further knowledge that allows theory and practice to develop and improve towards prevention, especially at primary and secondary levels.

STATE OF THE ART IN ADOLESCENT ANTISOCIAL BEHAVIOUR

The importance and the peculiarities of antisocial behaviours in adolescence is one of the most acknowledged aspects in developmental literature on this subject. In fact, the particular increase in antisocial behaviours during adolescence followed by a rapid decrease as individuals develop into adulthood has been named *the age crime curve* (Blonigen, 2010; Moffitt, 1993). Many explanations for this phenomenon have been presented: from biological aspects, such as the rise of testosterone levels and neurological maturation; to sociological aspects, such as the increase in the environment's role and the peers' influence on the individual's conduct (e.g. Blonigen, 2010; Farrington, 2007; Tremblay, 2000). In fact, distinctions in antisocial behaviours can be set according to several criteria, but age appears to be, if not the main focus, at least an important topic of discussion for many authors (Farrington, 2007; Lahey & Waldman, 2004; Moffitt, 1993; Patterson & Yoerger, 2002; Thornberry and Krohn, 2004; Zara & Farrington, 2010).

At this purpose, Moffitt (1993) argues that both prevalence and incidence of offending are more frequent in adolescence and that criminal offenders are mostly teenagers because, in childhood, delinquency is more of an individual psychopathology, while in adolescence it becomes almost normative (changing again to being psychopathological in adulthood). In line with this author's position, research points out to a relation between precocity and severity/persistence, that is, the earlier the onset of deviant behaviours, the more severe and persistent the antisocial path will be. It is argued that, when problems start later in development, individuals may have already experienced some prior positive or prosocial opportunities that can serve as protective factors against a persistent delinquent career (Moffitt, 1993; Patterson & Yoerger, 2002; Thornberry & Krohn, 2004).

From a distinct viewpoint, Tremblay's work (2000, 2010) suggests a differentiation of antisocial behaviours according to types of antisocial manifestations instead of age-of-onset. In this regard, a recent study by Burt, Donellan, Iacono & McGue (2011) indicates that, contrary to what was anticipated earlier, the age at which antisocial behaviours first manifest is not as important as the behavioural subtypes linked to age-of-onset for the prediction of antisocial trajectories. In fact, some research has pointed out to the fact that, not only different antisocial behavioural subtypes may evidence different behavioural trajectories, but also that developmental trajectories of different types of antisocial behaviour may not be driven by the same proximal and causal factors (Burt, 2012; Lacourse et al., 2002). In

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particular, Burt (2012) concluded that aggressive (overt) behaviours tend to be more consistent over time, while rule-breaking (covert) behaviours tend to be more frequent during adolescence.

Interestingly, it appears that the distinction according to behavioural subtypes corresponds more or less to the age-of-onset distinction: physical aggression is particularly characteristic of childhood-onset antisocial behaviours, whereas rule-breaking is linked to adolescence-onset antisocial behaviours (Burt, 2012). This may be explained by aspects related to socioemotional development, since "one of the major developmental challenges of a child is to learn to inhibit physical aggression and use other patterns of action in his attempts to achieve his goals" (Tremblay, 2010, p. 347). In sum, it appears that the differences between distinct behavioural subtypes evidence normative aspects of socioemotional development, as the differences between early and late-onset antisocial behaviour trajectories also seem to reflect.

Regarding individual variables, literature shows that psychosocial competences are determinant, either as protective or risk factors, in guiding individual's choices regarding social behaviours (Selman & Adalbjarnardottir, 2000), being particularly important to study in childhood and adolescence, while they are still in development, at least, until young adulthood (Nunner-Winkler, 2010; Steinberg, 2009). In fact, more immature stages of morality have been identified as risk factors for antisocial behaviours, whereas achieving more mature stages of moral development may protect against deviant conducts (Monahan, Steinberg, Cauffman & Mulvey, 2009; Stams et al., 2006).

Psychosocial maturity is believed to encourage prosocial and altruistic behaviour, serving as protective factor against several behaviour problems. Likewise, perspective-taking ability has been found to lead to more relationship enhancing outcomes, whereas the lack of such competence may contribute to facilitating anger arousal in situations of interpersonal provocation (Mohr, Howells, Gerace, Day & Wharton, 2007). Moral disengagement has also been strongly linked to antisocial behaviours in childhood and adolescence, as well as to delinquent behaviour (Bandura, 2002; Hyde, Shaw & Moilanen, 2010), showing that deviant behaviour in adolescence may not only be explained by immature stages of morality, but also from aspects related to cognition and motivation. In sum, having underdeveloped psychosocial competences appears to encourage antisocial or aggressive behaviour, whereas "to the extent adolescents can develop perspective on the complex connections between their own biological, personal, and cultural relationship histories and their own individual health choices in daily life, they are more likely to keep themselves out of harm's way" (Selman & Adalbjarnardottir, 2000, p. 50).

Empathy, as part of the general group of psychosocial competences, should also be taken into account. In fact, several researchers mention its protective effect against antisocial behaviours (Batanova & Loukas, 2011; Dodge, Coie & Lynam, 2008) since it may elicit altruism and inhibit aggression (Hastings, Zahn-Waxler, Robinson, Usher & Bridges, 2000; Palmer, 2005 *in* McPhedran, 2009). Furthermore, low empathy has been associated with some types of antisocial behaviours and delinquency (Bennett, Farrington & Huesmann, 2005; Jolliffe & Farrington, 2011).

Personality and individual dispositions have also been proven to have a significant role in social behaviours in the sense that each person brings to his/her relationships a set of individual traits and characteristics that may influence the way he/she interacts with others, and "the social situations in which individuals find themselves are determined, at least in part, by their personality" (Eysenck & Eysenck, 1985, p.313). Within the study of personality in the scope of antisocial behaviours there is a vast array of literature that tested the hypothesis that there are differences in personality between individuals who manifest and do not manifest antisocial tendencies (e.g. Eysenck & Eysenck, 1985; Gray, 1991), drawing our attention to the importance of understanding what characteristics make some individuals more vulnerable to adopt antisocial behaviours than others. Overall one aspect appears to be widely pointed out by authors and researchers as characteristic of individuals with antisocial tendencies: impulsivity (Carrasco, Barker, Tremblay & Vitaro, 2006; Caspi, 2000; DeLisi &

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Vaughn, 2008; Dodge et al., 2008; Farrington, 2007; Koolhof et al., 2007; McEachern & Snyder, 2012; Moffitt, 1993; Romer et al., 2009). In fact, not only is impulsivity often mentioned together with references of lack of self-control, weak constraint and failure to delay gratification (Baumann & Odum, 2012), but it has also been related to Eysenck's Trait of Psychoticism (Colder et al., 2011), the trait that has shown the most significant relation with antisocial behaviours (Carrasco et al., 2006; Center, Jackson & Kemp, 2005).

It should be noted that impulsivity, as a general trait, has been found to decline from adolescence to adulthood (Blonigen, Littlefield, Hicks & Sher, 2010; Steinberg et al., 2009), which may imply that, in general, as adolescents grow into adulthood, they will tend to become less prone to antisocial behaviours. This suggests that "normative changes in personality may play a significant role in desistance from crime and antisocial behaviour during the transition from late adolescence to early adulthood" (Blonigen, 2010, p. 98). Undoubtedly, adolescence is a stage when sensation-seeking behaviours are at its highest levels and it is possible that such behaviours may, not only, be a characteristic of this period of development, but also "necessary to develop essential social competences to achieve independency in adulthood" (Luna, 2010, p. 333). Hence, it is possible that "experience gained during the adolescent period may help adults to recognize the hazards of some forms of risk taking or to provide skills to constrain such activity" (Romer, Duckworth, Sznitman & Park, 2010, p.327), thus reducing the prevalence of antisocial behaviours in early adulthood.

Regarding the way adolescents perceive themselves, when studied in the scope of social functioning, self-concept has been regarded both as risk and protective factor. Actually, positive self-concept has been related to good mental health, educational benefits, positive development in adolescence, and many adjusted psychological and social outcomes that protect against behaviour problems (O'Mara, Marsh, Craven & Debus, 2006), while negative self-concept has been associated with aggression and delinquency. Interestingly, research on this matter has shown that aggressive children tend to have polarized self-concepts, that is, they tend to maintain either a generally positive or a generally negative self-concept. In this sense, the existence of an association between self-concept and antisocial behaviours is widely acknowledged (Edens, 1999; Salmivalli, 2001; Torregrosa, Ingles & Garcia-Fernandez, 2011; Ybrandt, 2008; Ybrandt & Armelius, 2004), though the nature of such association still divides researchers.

On the one hand, negative self-concept has been associated with antisocial behaviours, with several studies pointing out to associations between low self-concept and engaging in various forms of deviant conducts (Adams, Robertson, Gray-Ray & Ray, 2003; Edens, 1999; Rätty, Larsson, Söderfeldt & Larsson, 2005; Torregrosa et al., 2011; Ybrandt, 2008). A possible explanation could be that aggression serves as a response or attempt to protect an already devalued self-concept. On the other hand, a considerable body of research has found associations between antisocial behaviours and positive self-concept. Indeed, an overly positive self-concept is believed to predict increasing levels of aggression and dysfunction (Edens, 1999; Salmivalli, 2001; Ybrandt, 2008) with some research showing that there seems to be a tendency for aggressive children to maintain not only a positive self-concept compared to the perception of others about their characteristics (Edens, 1999), but also to maintain an overly positive perception of themselves or, in other words, an inflated self-view (Salmivalli, 2001). Some authors argue that an antisocial conduct may be perceived by aggressive children as a mean to maintain a positive self-image or, in other words, "antisocial behaviour serves the proactive function of protecting, or perhaps even enhancing an inflated sense of self" (Edens, 1999, p. 167). Besides, aggressive children are believed to be more likely to blame others than themselves for their negative outcomes (Cairns, 1991 *in* Dodge et al., 2008), which may not only explain but also reinforce their overly positive self-concepts.

In this context, research based on the multidimensionality of the self-concept suggests that theoretical and practical approaches should "focus on specific dimensions of self-concept and then

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assess the effects of the intervention in relation to that particular self-concept domain instead of, or in addition to, other specific and global components of self-concept” (O’Mara et al. 2006, p. 201). In fact, adolescents manifesting antisocial tendencies have been found to show a particularly positive self-concept in physical and social domains (Salmivalli, 2001; Torregrosa et al., 2011), which may be explained by a loss of motivation from adolescents with low perceptions of themselves to follow behavioural patterns endorsed by authority figures. Such lack of motivation may lead them to turn to alternative conducts (e.g. delinquent behaviour) which are often reinforced by groups such as their peers. Moreover, several antisocial acts require a good physical condition in order to be successfully performed (e.g. fighting, damaging property, etc.) which may promote a positive perception of one’s physical abilities and, sometimes, appearance (Torregrosa et al., 2011).

In the scope of individual characteristics related to antisocial behaviours, intelligence is one of the most consensual factors believed to play a role in deviant conducts. Research frequently mentions an association between verbal intelligence and antisocial behaviours (Ayduk et al., 2007; Lahey & Waldman, 2004). Some possible explanations may arise from the relation between verbal skills and self-regulatory competences, impulsivity, and feelings of guilt. Nevertheless, more general measures of intellectual capacity have been related to antisocial behaviour as well (Huepe et al., 2011; Koolhof et al., 2007), indicating that not only verbal skills may play a role in delinquency (and possibly also in self-regulatory competences). Among some of the most important findings in this regard, the Cambridge Study of Delinquent Development has not only identified low intelligence and poor school performance as some of the factors involved in the development of delinquency, but has also found that these dimensions may help to predict delinquency in adulthood (Farrington, 2007). Accordingly, many authors have demonstrated that low intelligence may constitute a risk factor for antisocial behaviours (Huepe et al., 2011; Lahey & Waldman, 2004; Levine, 2011). In particular, the hypothesis is raised that low IQ may predict persistent antisocial behaviour, and it may be a characteristic shared specifically by persistent delinquents. Moffitt (1993) argues that low intelligence may put children at risk of developing life-course-persistent antisocial behaviours, and that higher levels of intelligence, among others, may explain why adolescence-limited antisocial individuals do not persist with deviant behaviour after adolescence, since good cognitive capacity may provide opportunities to learn prosocial skills that protect individuals from engaging in antisocial trajectories that go beyond adolescence. Actually, not only has intelligence been shown to constitute both a risk and a protective factor for antisocial behaviours (Ayduk et al., 2007), but it also has been proven that low IQ delinquents tend to commit a higher frequency of offences, and more serious forms of delinquency, than higher IQ delinquents (Koolhof et al., 2007).

Although there is a wide consensus regarding the influence of intelligence in antisocial behaviours, there is still uncertainty concerning the dynamics of such influence. According to Farrington (2004), low intelligence may have an impact on the development of the individuals’ internal beliefs concerning antisocial behaviours and their social adequacy/inadequacy, thus influencing the likelihood of engaging in deviant conducts. Levine (2011) suggests that low intelligence impairs the development of decision-making abilities, the ability to compete for resources and material success, and the capacity to learn from experience, which makes individuals more prone to adopt antisocial behaviours. Finally, Huepe et al. conducted an investigation on the role of fluid intelligence in psychosocial adaptation, concluding that intelligence is “a central component of the ability to adapt to social contexts” (2011, p. 2).

CONCLUSIONS

The study of antisocial behaviours carries an immeasurable complexity due to the variability in antisocial manifestations, individuals, and trajectories, which “constitutes a challenge for theory,

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research and intervention design” (Moffitt & Caspi, 2001, p. 355). Laub, Sampson and Sweeten (2006, p. 323) recognize at this purpose that “there will always be a considerable heterogeneity in criminal offending no matter how many factors are taken into account”. In fact, this review makes it clear that in the antisocial phenomenon there are still numerous aspects to be enlightened and uncovered. Different authors concur when discussing the complexity and heterogeneity of antisocial behaviours and its underlying factors and, despite the acknowledgment of the role of several factors such as the ones discussed above, they are still far from being fully understood and explained.

Discussions on psychosocial maturity show us that adolescence, when social relations assume a growing importance in the individuals' lives, and when psychosocial competences are far from being fully developed, is a particularly critical stage to identify, prevent and/or compensate for psychosocial vulnerabilities. Likewise, the identification or personality characteristics that can make adolescents more prone to antisocial conduct provides valuable clues in terms of prevention and intervention. Regarding self-concept, research has not yet clarified if there is a particular pattern that defines a tendency of antisocial adolescents, like there are still aspects to clarify on the role of intelligence in social skills and abilities that enable individuals to restrain or redirect potential misbehaviour and vice-versa.

It is our belief that the state of the art in the adolescent antisocial phenomenon as presented in this paper provides a valuable starting point from which to develop further research and knowledge, offering important cues for investigation. For that reason, a project of investigation aimed at answering, among others, some of the questions raised above is being developed. With such project, for which data is currently being gathered in Portuguese schools and reformatories, we intend to identify, firstly, what behaviour problems are manifested in adolescence. Secondly, we will search for differences between individuals who manifest antisocial behaviours and those who do not, and between those who engage in different types of deviant behaviour. With such information, we will try to typify different patterns of antisocial behaviour in adolescence, based on their nature, frequency, severity, and onset. The role of each of the above mentioned individual factors together with other social and family factors will then be studied. We will also try to define the relative weight of each group of variables in influencing antisocial behaviours, and, finally, attempt to find the major risks for antisocial behaviours in adolescence, and what factors protect individuals from such conducts. In sum, it is our aim to build a developmental explanatory model for the antisocial phenomenon in adolescence that can answer some of the unanswered issues here presented, thus providing the possibility of better prevention programs at primary, secondary and tertiary levels.

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