Relational Aggression: Attitudes & Impact

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Defining Relational Aggression and Attitudes

Relational aggression (RA) is defined as behavior intended to harm others through the manipulation of relationships, damage to social standing, or threats of friendship withdrawal. This form of aggression stands in contrast to physical aggression, which involves direct physical harm, yet RA can inflict equally severe psychological distress and social exclusion. The study of attitudes toward relational aggression is paramount because attitudes often serve as the cognitive and affective precursors to behavior. A person's attitude represents a predisposition to respond favorably or unfavorably to a specific object, person, or situation, and in this context, the object is the strategic use of social harm. Understanding these attitudes requires acknowledging their inherent complexity; unlike overt physical violence, RA is often subtle, covert, and highly dependent on social context, making the attitudes supporting it equally nuanced. Crucially, research focuses on how individuals internalize the perceived **effectiveness** and **acceptability** of using social manipulation as a means to achieve personal goals or maintain social dominance.

Attitudes are generally conceptualized as having three core components: the cognitive, the affective, and the behavioral. The cognitive component involves beliefs about RA, such as believing that spreading a rumor is an effective way to eliminate competition for a desired resource, like a romantic partner or a leadership role. The affective component relates to the feelings evoked by RA, such as feeling justified, powerful, or even amused when witnessing or engaging in social exclusion. Finally, the behavioral component encompasses the readiness to act, meaning a positive attitude drastically increases the likelihood of employing RA when faced with social conflict or competition. When an individual holds a favorable attitude toward relational aggression, they are more likely to minimize its harmful effects, rationalize its use as a necessary evil, and view themselves as skillful social operators rather than malicious aggressors. This framework highlights why merely addressing the behaviors of RA without tackling the underlying supportive attitudes is often ineffective in intervention efforts.

The specific attitude targeted in psychological research is the level of endorsement or justification an individual applies to the use of relationship-based harm as a strategic tool. This goes beyond simple tolerance; it involves an active belief in the utility of RA for navigating complex social hierarchies. For instance, a positive attitude might manifest as the conviction that **social exclusion** is a legitimate, albeit harsh, mechanism for enforcing group conformity or maintaining the integrity of a clique. Researchers often assess the degree to which children and adolescents believe that RA is a means of gaining or maintaining **social status**, which is a powerful motivator during developmental periods focused intensely on peer acceptance. These attitudes are learned and reinforced within social systems, meaning that if a peer group rewards relational aggression with increased popularity, the positive attitude toward its use becomes deeply ingrained and resistant to change.

Theoretical Frameworks for Attitude Formation

The formation of attitudes toward relational aggression is largely explained through sophisticated psychological theories, prominently including Social Cognitive Theory (SCT) and the Theory of Planned Behavior (TPB). SCT, advanced by Albert Bandura, emphasizes the role of observational learning and vicarious reinforcement. Children and adolescents do not necessarily need to experience the consequences of RA directly; they learn by observing models--whether peers, parents, or media figures--who successfully use RA to achieve desired outcomes, such as popularity or control. If a student observes a socially dominant peer use rumor-spreading to successfully ostracize a rival without facing negative consequences, this observation reinforces the cognitive belief that RA is an effective and low-risk strategy. This process of **modeling** is critical, as it shapes the cognitive component of the attitude, leading to the expectation that similar actions will yield similar positive results for the observer.

The Theory of Planned Behavior provides another essential lens, suggesting that attitudes, subjective norms, and perceived behavioral control collectively predict behavioral intention. In the context of RA, the subjective norm is exceptionally powerful. This refers to the perceived social pressure to engage or not engage in the behavior. If an adolescent perceives that their close friends or their desirable social group tacitly or explicitly approves of relational aggression--meaning the norm is acceptance--their positive attitude toward RA will be significantly strengthened, leading to a higher intention to act aggressively. Furthermore, perceived behavioral control relates to the individual's belief in their ability to successfully execute the aggressive act. Since RA often requires high levels of social intelligence and manipulation, those who view themselves as socially skilled and capable of subtle coercion are more likely to develop favorable attitudes toward its strategic deployment.

Attitude formation is also heavily influenced by mechanisms of moral disengagement and cognitive dissonance. Moral disengagement refers to the psychological process of justifying harmful behavior by restructuring the action so that it appears less morally reprehensible. Individuals with positive attitudes toward RA frequently employ moral disengagement techniques, such as **minimizing the consequences** of their actions ("It was just a joke"), **dehumanizing the victim** ("They deserved it"), or **attributing blame** to external circumstances ("I was forced to do it because they started it"). These cognitive distortions allow the individual to maintain a positive self-image while engaging in harmful behavior, thereby solidifying the positive attitude toward RA. Without these psychological defenses, the internal conflict--cognitive dissonance--between knowing that RA is harmful and choosing to engage in it would be too uncomfortable, potentially forcing a shift toward a negative attitude.

Developmental Trajectories and Peer Group Influence

Attitudes toward relational aggression undergo significant developmental shifts, becoming more sophisticated and strategically justified as children transition into adolescence. In early childhood, attitudes toward aggression are often generalized, focusing on whether hurting others is simply "bad." However, by middle childhood, and particularly throughout early adolescence, attitudes concerning RA become highly contextualized. Adolescents begin to distinguish between aggression used for instrumental purposes (e.g., gaining resources or status) and aggression used for hostile purposes (e.g., pure emotional venting). Positive attitudes frequently emerge when adolescents recognize that RA is an extremely effective, low-risk method for controlling the social environment and achieving instrumental goals, such as securing popularity or maintaining exclusive friendships. This developmental stage is characterized by an increased focus on **social hierarchy** and reputation management, making attitudes that support social manipulation highly adaptive within competitive peer environments.

The peer group serves as the primary incubator for attitudes toward relational aggression during adolescence. Peer norms are arguably the most potent socializing force, often outweighing parental influence in the domain of social behavior. If a peer group, especially a high-status clique, explicitly or implicitly endorses RA--perhaps by laughing at instances of exclusion or rewarding the aggressor with attention--the individual members are highly likely to internalize a positive attitude toward that behavior. This process is driven by the fundamental need for belonging and acceptance; conformity to peer group norms, even aggressive ones, ensures continued membership and social standing. The attitude becomes cyclical: positive attitudes lead to aggressive behavior, which is reinforced by peer acceptance, which further solidifies the positive attitude. This phenomenon explains why interventions must often target the entire **social ecology** of a classroom or school, rather than focusing solely on individual aggressors.

A particularly important concept is the acceptance of aggression hypothesis, which posits that children who hold favorable attitudes toward relational aggression are often those who are perceived as socially competent, or at least highly visible and popular, within their peer groups. This finding challenges the traditional view that aggressive children are universally disliked. Instead, certain forms of aggression, particularly the strategic, covert nature of RA, are often associated with high levels of social power. When children observe that RA successfully confers status, their attitudes shift from viewing the behavior as morally wrong to viewing it as socially pragmatic. This endorsement of RA as a tool for social navigation is a powerful predictor of future aggressive acts, as the individual is not only capable of the behavior but also holds the internal justification that the behavior is appropriate, effective, and socially advantageous. The perceived effectiveness, therefore, fuels the positive attitude, which in turn maintains the aggressor's **social dominance**.

Gender Differences in Attitude Expression and Perception

While relational aggression is often stereotyped as "female aggression," research into attitudes reveals a more complex picture regarding gender differences. Historically, studies suggested that girls showed higher rates of RA, prompting the assumption that girls also hold more favorable attitudes toward it. However, more nuanced research indicates that while girls may employ RA more frequently than physical aggression, boys are often just as likely to endorse the acceptability and utility of RA, although they may express these attitudes differently. Boys might use physical aggression more often in conflict, but they still recognize and often approve of the manipulative power inherent in relational tactics, especially in contexts where physical aggression is deemed inappropriate or too risky, such as within highly structured school settings. Therefore, the difference may lie not in the attitude itself, but in the **frequency of behavioral enactment** based on gendered socialization norms.

Perceptual differences also play a significant role in how attitudes are formed and maintained across genders. Girls often perceive RA as highly effective for achieving goals related to **intimacy and exclusivity**, such as protecting a close friendship or excluding a perceived romantic rival. Their positive attitudes are often tied to the perceived success of social manipulation in stabilizing their immediate social network. Conversely, while boys may endorse RA, they might perceive its primary utility as a means to achieve broader social dominance or leadership roles, rather than maintaining close dyadic relationships. Furthermore, research suggests that the severity of RA is often judged differently based on the aggressor's gender; when girls use RA, it is sometimes normalized as "drama," potentially reinforcing the idea that the behavior is acceptable or inevitable, thereby strengthening positive attitudes toward its use among female peers.

It is crucial to consider that attitudes toward relational aggression often correlate more strongly with perceived social goals and psychological traits than with biological sex alone. For example, individuals of either gender who exhibit high levels of narcissism or Machiavellianism consistently display more favorable attitudes toward RA, viewing it as a logical extension of their need for control and manipulation. Similarly, regardless of gender, those who prioritize popularity and status maintenance over genuine intimacy are far more likely to rationalize and endorse the use of relationship-damaging behaviors. Therefore, while gender norms dictate *when* and *how* RA is deployed, the underlying positive attitude toward the manipulative utility of the behavior is often driven by shared psychological needs for power and **social influence**, making the study of underlying personality factors essential for a complete understanding of attitude formation.

The Role of Parental and Media Socialization

Parental socialization practices are foundational in shaping a child's early attitudes toward aggression and conflict resolution. Children whose parents model subtle, socially manipulative

behaviors--such as excluding certain individuals from social gatherings or using emotional withdrawal as a form of punishment--may internalize a positive attitude toward relational aggression. These parental behaviors, often termed "covert hostile parenting," teach the child that control can be achieved through social means rather than direct confrontation. Furthermore, inconsistent or highly coercive parenting styles often fail to instill strong internal moral barriers against harming others. If parents fail to explicitly condemn relational aggression or, worse, subtly reinforce it by showing approval when a child successfully "stands up" to a peer using social tactics, the child's attitude toward RA as an acceptable strategy is reinforced. Lack of parental monitoring is also a factor, as it removes the primary adult influence that might challenge and restructure developing pro-aggression attitudes, leaving the peer group's norms unchallenged.

Contemporary media consumption represents an increasingly powerful source of socialization, significantly impacting attitudes toward relational aggression. Television shows, films, and particularly social media platforms frequently glamorize or normalize relational aggression. Reality television, for instance, often features characters who use social sabotage, rumor spreading, and public shaming as central plot devices, and these characters are frequently rewarded with high visibility and perceived success. This media exposure provides a massive source of **vicarious reinforcement**, teaching young viewers that using RA is an effective, high-status means of navigating social life. The constant stream of conflict and exclusion on social media further desensitizes viewers to the harm caused by these behaviors, eroding the natural empathy that might otherwise lead to a negative attitude toward RA.

The normalization effect of media is critical: repeated exposure to relational aggression, often framed within an entertaining or high-stakes context, gradually lowers the perceived severity of the behavior. When a child sees a popular influencer or fictional character successfully destroy a rival's reputation without suffering lasting negative consequences, the mental calculus shifts: the behavior is viewed as less harmful and more socially useful. This process directly contributes to the cognitive component of a positive attitude, where the individual begins to believe that RA is a standard, perhaps even necessary, element of modern social competition. Counteracting this media influence requires not only limiting exposure but also teaching **critical media literacy**, enabling adolescents to deconstruct and challenge the narratives that glorify social cruelty and manipulation.

Measurement and Assessment of Attitudes

The reliable measurement of attitudes toward relational aggression presents significant methodological challenges, primarily due to the high likelihood of social desirability bias. Because relational aggression, once identified, is generally viewed negatively by adults and institutions, participants, especially older children and adolescents, often hesitate to report favorable attitudes directly. They may consciously or unconsciously skew their responses to align with what they

perceive as socially acceptable answers, leading to an underestimation of the prevalence of pro-aggression attitudes in self-report measures. To mitigate this bias, researchers must employ carefully constructed scales and sometimes utilize indirect or projective methods designed to tap into underlying cognitive structures without explicitly asking about approval of harm.

Common assessment instruments often rely on hypothetical scenarios or vignettes. In these measures, participants are presented with a detailed social conflict situation (e.g., "A student wants to sit next to the popular group, but there are no seats. The popular group starts whispering about the student.") and are then asked to rate the acceptability, effectiveness, or necessity of various aggressive responses. Specific scales, such as the Children's Social Behavior Scale (CSBS) or similar attitude scales, often use Likert-type responses to gauge endorsement of aggressive tactics. Researchers are particularly interested in measuring three distinct facets of the attitude:

Acceptance: The belief that the behavior is morally permissible.
Expectation of Success: The prediction that the aggressive act will achieve the desired social outcome.
Justification: The cognitive restructuring used to rationalize the behavior, often through attribution of hostile intent to the victim.

Beyond explicit self-report, researchers have increasingly utilized implicit measures to bypass conscious filtering and social desirability concerns. Implicit measures, such as the Implicit Association Test (IAT) or reaction time tasks, assess the strength of automatic associations between relational aggression and positive concepts (like "success" or "power") or negative concepts (like "harm" or "unfair"). If an individual quickly and automatically associates relational aggression with positive outcomes, it suggests a deeply ingrained, favorable attitude that might not be captured by direct questioning. These implicit attitudes are often highly predictive of spontaneous, non-reflective aggressive behavior, providing a more comprehensive and ecologically valid assessment of the individual's true predisposition toward the use of **social manipulation**.

Consequences of Positive Attitudes toward Relational Aggression

Holding a positive attitude toward relational aggression is a powerful and consistent predictor of engaging in aggressive behavior. Individuals who endorse the belief that RA is effective and acceptable are significantly more likely to initiate, perpetuate, and escalate conflicts using social means. Furthermore, favorable attitudes toward RA contribute not only to active perpetration but also to the maintenance of an aggressive peer environment through the behavior of bystanders. Children who view RA positively are less likely to intervene when they witness victimization, more likely to reinforce the aggressor (e.g., by laughing or joining the exclusion), and thus contribute to the overall normalization of cruelty within their social group. This creates a vicious cycle where the

acceptance of aggression fuels its use, leading to increased victimization and a climate of chronic social anxiety and distrust among peers.

The consequences extend beyond immediate behavioral outcomes to impact the social ecology and mental health of the peer group. When positive attitudes toward RA are widespread, the entire social system suffers. Victims of RA often experience intense psychological distress, including anxiety, depression, feelings of isolation, and somatic complaints. More subtly, a climate where RA is accepted teaches all children that social relationships are fundamentally conditional and manipulative. This undermines the development of genuine **trust and empathy**, hindering the formation of supportive, intimate friendships. The long-term implication is a cohort of individuals who may struggle to navigate conflict constructively, relying instead on coercive and indirect methods learned during their formative years.

For the perpetrators themselves, while positive attitudes toward RA may confer short-term benefits such as popularity or status, the long-term psychological outcomes are often detrimental. A persistent reliance on social manipulation and the justification of harm is linked to the development of callous-unemotional traits, high levels of narcissism, and Machiavellian personality characteristics. These traits predict difficulties in forming stable, reciprocal adult relationships and may be precursors to antisocial behavior in later life. Therefore, the positive attitude, while seemingly adaptive in the immediate, competitive peer environment, ultimately reinforces a pattern of behavior that can lead to significant **psychosocial maladjustment** and impairment in moral development.

Intervention Strategies and Prevention

Effective intervention and prevention programs aimed at reducing relational aggression must strategically target the underlying attitudes that sustain the behavior. Simply punishing aggressive acts is often insufficient, as it fails to challenge the aggressor's deeply held belief that RA is a necessary or effective tool. The core of successful intervention lies in cognitive restructuring--challenging the utility and acceptability of aggressive strategies. This involves helping individuals identify the moral disengagement techniques they employ and replacing those justifications with alternative, prosocial cognitive scripts. For example, instead of allowing the belief that "exclusion is necessary to protect my friends," the intervention encourages the belief that "managing conflict constructively strengthens relationships."

Social-emotional learning (SEL) programs are pivotal in prevention, as they equip children with the skills necessary to develop negative attitudes toward relational aggression. Key components of these programs include focused training in:

Empathy and Perspective-Taking: Helping children understand the emotional harm inflicted by RA, thereby reducing justification and increasing affective response to victims.

Non-Aggressive Conflict Resolution: Teaching and practicing constructive alternatives to social manipulation, such as direct communication and compromise.
Emotional Regulation: Providing tools to manage frustration and anger without resorting to covert, relationship-damaging tactics.
Challenging Social Norms: Explicitly discussing how media and peer groups often misrepresent the true effectiveness and acceptability of aggression.

By enhancing these skills, children develop internal resources that make relational aggression less appealing as a means of control, thereby fostering negative attitudes toward its use.

Finally, systemic and ecological interventions are essential because attitudes toward RA are heavily influenced by the peer environment. Successful prevention programs must focus on shifting the subjective norms of the entire school or peer group. This involves training teachers, administrators, and parents to consistently identify, define, and condemn relational aggression, ensuring that the behavior is never tacitly rewarded with attention or status. Bystander intervention training is particularly important, as it empowers peers to challenge RA and removes the audience necessary for the aggressor's reinforcement. When the social environment uniformly communicates that relational aggression is unacceptable, ineffective, and carries significant social costs, the prevailing attitude shifts from acceptance to rejection, significantly reducing the viability of RA as a social strategy and promoting a healthier, more inclusive social climate.