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**Pathways from Community Violence
Victimization to the Perpetration of
Aggression: the Role of Biological and
Psychosocial Influences**

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In prior studies, we found that 76-82% of young adults report a history of community violence (CV) victimization. Furthermore, those with high levels of exposure report more psychological maladjustment, including depressed mood, aggression, posttraumatic stress disorder symptoms, and interpersonal problems. The cycle from CV exposure to perpetration of aggression will be discussed in terms of psychophysiological processes, coping styles, and social support that were found to interact with victimization to increase risk. Three studies are described. In the first, 47 young adult victims and non-victims of CV completed self-reports of aggression and two stressor tasks. Measures of heart rate and cortisol were examined before and after the stressors. Results indicated that low baseline heart rate was associated with aggression regardless of victimization, and increased post-stressor cortisol was associated with aggression only in victims. In the second study, 40 children completed self-report measures of CV exposure (i.e., victimization, witnessing, or hearing about violence) and were assessed for resting heart rate. Parents reported on their child's aggression (i.e., reactive or proactive). Results indicated that CV victimization was positively related to proactive and reactive aggression only in conditions of low resting heart rate. In the third study, 515 college students completed self-report inventories on CV exposure, aggressive behavior, perceived support from family and friends, and coping strategies. Results indicated that high CV victimization was associated with aggression under conditions of low friend support and high avoidant coping. These studies support a biosocial interaction for aggression whereby the effects of CV victimization may be potentiated when coupled with low resting heart rate and increased hypothalamic-pituitary-adrenal responsivity to stress. Moreover, avoidant coping is a risk factor and perceived friend support is a protective factor for a putative "cycle of violence." Future research may explore how psychophysiological and psychosocial processes inter-relate, and their implications for intervention/prevention.

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