Analogue assessment of frustration tolerance: Association with self-reported child abuse risk and physiological reactivity

Christina M. Rodriguez a,*, Mary Bower Russa b, John C. Kircher c

a University of Alabama at Birmingham, USA
b Grand Valley State University, USA
c University of Utah, USA

ABSTRACT

Although frustration has long been implicated in promoting aggression, the potential for poor frustration tolerance to function as a risk factor for physical child abuse risk has received minimal attention. Instead, much of the extant literature has examined the role of anger in physical abuse risk, relying on self-reports of the experience or expression of anger, despite the fact that this methodology is often acknowledged as vulnerable to bias. Therefore, the present investigation examined whether a more implicit, analogue assessment of frustration tolerance specifically relevant to parenting would reveal an association with various markers of elevated physical child abuse risk in a series of samples that varied with regard to age, parenting status, and abuse risk. An analogue task was designed to evoke parenting-relevant frustration: the task involved completing an unsolvable task while listening to a crying baby or a toddler’s temper tantrum; time scores were generated to gauge participants’ persistence in the task when encountering such frustration. Across these studies, low frustration tolerance was associated with increased physical child abuse potential, greater use of parent–child aggression in discipline encounters, dysfunctional disciplinary style, support for physical discipline use and physical discipline escalation, and increased heart rate. Future research directions that could better inform intervention and prevention programs are discussed, including working to clarify the processes underlying frustration intolerance and potential interactive influences that may exacerbate physical child abuse.

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Classic psychological theory has long underscored the role of frustration in promoting aggression (Dollard, Doob, Miller, Mowrer, & Sears, 1939). Prominent theories have emphasized that frustration can arise from blocked end goal attainment, with frustrating situations that lead to negative affect having a particularly pronounced impact on the tendency for aggression (Berkowitz, 1989, 2012). In fact, goal blockages that are perceived as intentional and illegitimate (versus unintentional and justified) are among the most likely to lead to aggressive responding (Anderson & Huesmann, 2003; Berkowitz, 2012). Although frustration is often treated interchangeably with anger in the broader literature (e.g., Wranik & Scherer, 2010), within contemporary models of aggression (e.g., Berkowitz, 2012), frustration and other forms of negative affect (e.g., sadness, depression, irritability) are viewed as common precursors to anger and aggression. Anger and aggression are thus viewed as possible, but not inevitable, outcomes of experiencing frustration (Berkowitz, 2012). Although the triggers for these two

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emotional reactions often appear to coincide in time, they are theoretically distinct: frustration ensues when an individual is thwarted in achieving a goal (Anderson & Bushman, 2002); anger appears to be the consequence of attributions of blame for an event (Power & Dalgleish, 2008). Thus, frustration due to circumstances not perceived as aversive or intentional may not precipitate anger (Anderson & Huesmann, 2003; Berkowitz, 2012).

When parenting contexts are considered, child misbehavior (which is often judged as intentional and aversive) seems particularly likely to evoke reactions of frustration and/or anger in parents. Indeed, when faced with what is often viewed as willful noncompliance within a coercive parent–child exchange (e.g., Patterson, 1982), parents may shift from initial frustration at not being able to successfully affect the child’s behavior (i.e., blocked goal attainment) to anger. The parental disciplinary response may shift, in tandem, from instrumental aggression (i.e., aggression intended to achieve an objective such as changing the child’s behavior) to hostile, emotional aggression (i.e., aggression intended to harm; see Berkowitz, 1989 and Feshbach, 1964 for more on these two classic types of aggression).

Consistent with this view, physical child abuse often ensues when parents escalate the severity of an initially more benign physical discipline approach (Herrenkohl, Herrenkohl, & Egolf, 1983; Whipple & Richey, 1997), implying that putatively instrumental aggression may become hostile aggression when a parent is faced with perceived child noncompliance they view as intentional. For example, in interviews with abusive parents, 91% of parent’s first response to the child was non-abusive, but abuse arose when the parents escalated to punitive physical discipline and abuse (Kadushin & Martin, 1981). As a result, many conceptualize parent–child aggression (PCA) as occurring along a continuum (Graziano, 1994; Greenwald, Bank, Reid, & Knutson, 1997; Rodriguez, 2010; Straus, 2001a, 2001b; Whipple & Richey, 1997), wherein milder forms of physical discipline on one end can progress to physical abuse further along the continuum. Child abuse potential (Milner, 1994) predicts the likelihood that an individual will move along this continuum from milder forms of PCA toward physical abuse.

Considerable attention has been devoted to the role of anger in the risk for PCA, with relatively little consideration of its precursor, frustration. Anger is presumed to intensify general tendencies for aggression (Baumeister & Bushman, 2007) and is often implicated in risk for parents’ physical abuse perpetration (Black, Heyman, & Smith Slep, 2001; Stith et al., 2009). The self-reported tendency to overtly express anger is associated with greater parental child abuse potential (Robyn & Fremouw, 1996; Rodriguez & Green, 1997; Rodriguez & Richardson, 2007). Rarely, however, is low frustration tolerance considered specifically as a risk factor for child abuse. Although frustration has been demonstrated to influence the types of cognitive processing that could lead to physical abuse perpetration (e.g., Russa, Rodriguez, & Silvia, 2014), research has yet to focus explicitly on frustration as a risk factor for child abuse.

Ultimately, increased understanding of the association between frustration and PCA risk could serve to inform future intervention programming to reduce abuse risk. Only a limited number of child abuse intervention programs include anger management skills (e.g., Acton & During, 1992; Donohue, Miller, Van Hasselt, & Hersen, 1998; Sanders et al., 2004), whereas many other intervention programs emphasize relationship building, stress management, social support enhancement, and/or child behavior management (e.g., Fantuzzo, Stevenson, Kabir, & Perry, 2007; Herschell & McNeil, 2007; Swenson, Schaeffer, Henggler, & Faldowski, 2010). If low frustration tolerance is associated with risk for PCA, targeted interventions focused on parental decision-making and behavioral control at this earlier level of emotional arousal (i.e., frustration), prior to escalation to anger and physical abuse, might be useful.

Methodological issues in studies of PCA risk, however, have hampered research. A few laboratory paradigms have employed behavioral simulations of aggressive behavior as a proxy for child abuse (e.g., Crouch et al., 2012; Passman & Mulhern, 1977; Vasta & Copitch, 1981), but the field continues to rely heavily on the assessment of concepts like anger via self-report. Self-report is highly susceptible to response bias and distortion, and it may result in intentional, or even unconscious, misrepresentations (Fazio & Olson, 2003). For example, respondents may be inclined to embellish their abilities to control their anger or tolerate frustration, motivated to present themselves in a socially desirable manner, and/or motivated by positive self-perception biases. Because of the shortcomings of self-report assessments of frustration, and the desire for experimental designs, analog approaches are sometimes favored in aggression research. Many analog tasks are designed to reduce response biases by assessing the target concept through implicit means. Because the respondent is not fully aware of the task’s intent or how it will be evaluated, it is less likely that responses will be consciously or unconsciously manipulated (Fazio & Olson, 2003). Analog approaches can complement and enrich the information available from self-report strategies (Nosek, 2007).

In one early study, a small sample of undergraduates was placed in a frustrating teaching condition, and participants’ subsequent “aggressive” responses to a fictional child were assumed to arise from increased frustration due to aversive child behavior (Vasta & Copitch, 1981). Analog tasks like the Mirror Tracing Persistence Task (Strong et al., 2003) and the Paced Auditory Serial Addition Task (Lejue, Kahler, & Brown, 2003) can provide an alternative to a self-report assessment of frustration, but neither of these analog tasks pertain to parenting nor have any measures of frustration tolerance been utilized to predict PCA risk.

Given the desire to explore the association between frustration tolerance and PCA while recognizing the methodological limitations of self-reports, the current investigation evaluated whether an analog assessment of frustration tolerance (Frustration Intolerance Task, FIT; McElroy & Rodriguez, 2008) designed to specifically elicit parenting-related frustration would be associated with child abuse potential. Consistent with the literature that frustration arises when an individual is thwarted in achieving a goal, the FIT requires participants seek a store exit (simulated by working through an insoluble computerized maze attempting to find the exit) while listening to a crying child. Thus, in addition to arousing frustration by
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