

Review Article

Aggressive Orientated Self-Concept as Probable Determinant of Aggression of University Students: Mental Health Challenges

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INTRODUCTION AND OVERVIEW

Aggression and the mosaic of manifestations is a reality than will confront society in 2026 and onwards. To be a life is in essence the result of being aggressive [1]. Through empirical research during the past 30 years, it is clear that everyone knows when aggression manifests. However, to demarcate the boundaries and define of aggression is unclear. Aggression is necessary, but extreme aggression needs to be managed. The question is: Is it possible to intervene in a scientific sound way? Can intervention programmes be developed to ensure that aggression can be beneficial rather than detrimental? The prominent question behind all research was “can pivotal personality aspects related to aggression be identified and used to assist individuals in promoting their mental health.” It was clear that the self and the self-concept of involved individuals is at the core of aggression.

However, no published research exists concerning the probable relationship between an “aggressive orientated” self-concept and resultant aggression. Nevertheless, questions such as “Is there a relationship between self-concept and aggression of individuals and what is the nature of this relationship? If a natural aggressive orientation exists, does it differ between individuals? Does the level of an aggressive self-concept of an individual result in aggression?” Explicitly the gap in the research is: Are individuals aggressively inclined, i.e., do self-concepts of individuals differ concerning an aggressive orientation, and does it result in aggressive behaviour? Therefore, when a person perceives that s/he has a “more aggressive orientated self-concept” as compared to a person having

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a “lesser aggressive orientated self-concept”, will they differ in manifested aggression? University students were invited to participate in the research.

The hypothesis is: When comparing two groups of students with different aggressive orientated self-concepts, it is expected that they will differ significantly concerning aggression.

OBJECTIVE

To explore the significance of differences in aggression between students perceiving themselves as having a “lesser aggressive orientated self-concept” and those having a “more aggressive orientated self-concept”.

RESEARCH DESIGN AND METHOD

The probable significance of differences was explored between the groups of students perceiving themselves as having a “more aggressive orientated self-concept” versus students having a “lesser aggressive orientated self-concept” regarding aggression. The research design and method were exploratory, descriptive, deductive, and inferential [2].

Population, Sample and Questionnaire

Students from one faculty in a South African university were invited to participate anonymously. Students were invited to describe their perceptions on an electronic/ emailed questionnaire (85 items measured on a five-point Likert scale). 454 students were invited. Eventually 227 completed/usable questionnaires/students from undergraduate level to doctoral level were received and

formed the dataset. 64 were males; 59 studied towards honours, masters, or doctoral qualifications; and 165 were undergraduates or Post-Graduate Certificate students.

Data Analysis

Data Analysis were statistically analysed. To assess reliability and validity Cronbach alphas and principal component analyses (PCA) were conducted. Hypothesis testing was done using Students' *t*-tests on the significance of differences in aggression between the two groups were calculated per item (*P*-values of 0.01 (1%) and 0.05 (5%-level of significance). Ethical measures were applied (Ethics clearance number 2013-018, updated 2017 to 2017-055).

THEORETICAL CONTEXTUALISATION

Self-concept, aggression, and mental health are inherent aspects of being human [3]. The significance of differences between the two groups concerning aggression were compared. Consequences for mental health was considered.

Independent variable: Self-concept, and aggressive self-concept

A person's **self-concept** is the understandings based on individual experiences, body image, thoughts, and how the person tend to label her/himself in various situations and interactions [4,5]. A person's self-concept is multidimensional, dynamic, and built upon perceptions over a lifetime [4-7]. Thomaes and Bushman et al. [8], indicate that having a low/negative self-concept is associated with "bad" things and feelings and can be a cause of aggression, whereas a high self-concept makes a person feels good. Self-concept acts as "filter" for experiences, perceptions, and decisions to act.

Aggression

It is acquired behaviour, intended to harm, or damage someone or something [5]. Therefore, having a low self-concept can cause aggression [8]. Analogous to the self-concept of a person, aggression is multi-faceted and part of everyday life. The manifestation of aggression is diverse, varies in intensity and presents in different formats, i.e., from verbal to non-verbal to physical or combinations of these. Bandura et al. [9], Orton et al. [10], and Sadock, Sadock & Ruiz et al. [3], view aggression as actions intended to cause physical harm; verbal attacks, premeditated social exclusion of others; coercion; intimidation; and managerial styles that intend harmful consequences to those persons subjected to it [3]. Human behaviour is motivated [3]. It is an individual interpreting aggression and the "interpreting" person who decides to act.

Aggressive self-concept

Self-concept plays a pivotal role in interpreting possible aggression. Thereafter, it is the individual through his/her self-concept that ascribe the necessity of (aggressive) action. The question is: what is the role of a higher or lower self-concept as a/the cause of aggression? Translated into this research context: will a student with an overly aggressive orientated self-concept act overly aggressive and thus often experience detrimental effects on mental health? Research [11-13], indicates that there exist relationships between aggression and mental health; aggression influences achievement; aggression is part of life; aggression is an intrinsic part of a person's personality and self-concept; aggression changes with development, and aggression plays a role in the life of university students. It is posited that the self-concept of persons differs concerning an aggressive orientation, i.e., an aggressive orientated self-concept versus a less aggressive orientated self-concept.

Aspects that were used in this research to assess aggressive self-concept dealt with issues such as "being eaten up with jealousy"; a tendency to shut other people out of my group"; "When angry, take it out on people close"; "feeling that people laugh at me behind my back"; "tell peoples' secrets to other persons"; "a tendency to criticize peoples' physical appearance (e.g. hair styles, clothes, etc)"; "see oneself as being harsh towards others"; view oneself as being harsh towards self"; "feelings of having gotten a raw deal in life"; "feeling that others seem to get breaks in life"; and "wondering why I sometimes are feeling so bitter about things". These are aspects of self-concept describing an aggressive orientation and are formulated in 11 items. Each item was assessed on a five-point Likert scale (Cronbach alpha was 0.821). The raw counts for each student on these 11 items were added together and used to divide the students into a group having a "more aggressive orientated self-concept" (n=112) versus students having a "less aggressive self-concept" (n=115). The two groups were used to test the differences concerning the three factors of aggression (Table 1).

DEPENDENT VARIABLE: AGGRESSION

In exploring the nuances within aggression, the three factors of aggression identified during previous research were retained [12] (Table 1). Factor1 was identified as Overt verbal aggression seeing that the items loading on this factor refer to planning and actions to act aggressive in an overt verbal manner and/or in a visible, unconcealed, open, plain, and blatant manner towards other persons. Factor2 was identified as Overt physical aggression as this factor indicates aggressive physical behaviour

Table 1: Three factors describing Aggression: Rotated Component Matrix ^{a to e}

		Factors		
		1	2	3
Q29	I have trouble controlling my temper		.686	
Q37	I lose my temper for no good reason		.698	
Q45	Given enough provocation, I will hit another person		.630	
Q47	I get into arguments when people disagree with me			.578
Q48	I yell at people for no good reason at all	.507		
Q52	I get the urge to trip other people	.561		
Q53	I tell false stories about people	.738		
Q55	I plan secretly to bother other people	.626		
Q56	I tend to shove (push) people when I am upset	.588		
Q57	I say bad things about people behind their backs	.787		
Q58	I call people negative names	.726		
Q62	I sometimes feel like a powder keg ready to explode		.613	
Q63	I sometimes push other people down to the ground	.577		
Q65	I try to influence people to dislike a specific person with whom I am angry	.596		
Q68	My friends say that I am somewhat argumentative			.818
Q76	I sometimes become so mad that I tend to break things		.650	
Q77	I view myself as aggressive towards myself		.675	
Q82	Some of my friends think I am a hothead			.687
Q85	I often find myself disagreeing with people			.660

Rotation Method: Varimax with Kaiser Normalization; explained variance 51.7%.

a. Rotation converged in 7 iterations.

b. Kaiser-Meyer-Olkin Measure of Sampling Adequacy: 0.887

c. Bartlett's Test of Sphericity: P-value = 0.000

d. Cronbach alpha: Questionnaire 0.897 (19 items); Component 1: 0.857 (9 items);

e. Component 2: 0.811 (6 items); and Component 3: 0.732 (4 items)

revealing open, blatant, evident, visible, unconcealed, explicit aggression. Factor3 was identified as Aggressive inclination concerning others.

Gauged against Field et al. [14], the validity of the principal component factor analyses (PCA) was acceptable. The identified three factors were used in the further assessment of differences between the students having a "lesser aggressive orientated self-concept" versus students having a "more aggressive orientated self-concept".

FINDINGS

The Student t-test results per item (not given, available on request) indicate overwhelmingly that the hypothesis is supported. Students having a "lesser aggressive orientated self-concept" versus students having a "more aggressive orientated self-concept" differ significantly on aggression. The hypothesis is supported for most of the items on the 1% level. Students having a "lesser aggressive orientated self-concept" express a significantly lower level of aggression when compared to students having a "more aggressive orientated self-concept."

- Concerning Overt-verbal aggression, this hypothesis is supported; all means are lower than 2.04 on a 5-point scale.
- Concerning Overt-physical aggression, this

hypothesis is supported; mostly, means are less than 2.68 on a 5-point scale.

- Concerning Aggressive inclination concerning others, this hypothesis is also supported on the 1% level of significance; means are mostly lower than 2.66 on a 5-point scale.
- The students having a "lesser aggressive orientated self-concept" (low means) are significantly less aggressive than students who are having a "more aggressive orientated self-concept."
- The general trend is that the 227 students perceive that they have a low level of aggression. Item means are all less than 3.37 on a 5-point scale.

Findings are explicit and clear. Students perceiving that they have a "lesser aggressive orientated self-concept" compared to students having a "more aggressive orientated self-concept" act less aggressive on all factors of aggression. However, both groups of students perceive themselves as NOT overly aggressive.

IMPLICATIONS

Although the findings are explicit, it is less easy to interrogate the complexity of the implications for mental health. When does a healthy aggressive orientated self-concept become a mentally unhealthy? Stated differently, when does acting healthy assertive becomes a mentally unhealthy aggressive orientated self-concept? It seems as if these students, although it might be implicit, are aware of their own aggressive orientated self-concept. Primarily, if this awareness is only implicit university management should ensure that students are assisted to understand and manage aggression in a healthy manner. If aggression is not managed, it can detrimentally affect mental health. Research [3-11], indicates that when levels of aggression are high, the society/university and the involved persons' mental health can be at risk. Healthy mental development happens in interaction with other persons. Prospective programmes should thus address the mental health needs of students [15-17].

LIMITATIONS, FURTHER RESEARCH AND CONCLUSION

Students in this sample assessed that their aggression are not extremely high. Is this a true reflection of their behaviour, or were they implicitly alerted to evade labelling themselves as being overly aggressive? We accepted these students' responses as a true reflection. Thus, these students seem mentally healthy. Nevertheless, one should bear in mind that aggression in South Africa is

widespread, even on university campuses [11]. This data was not specifically developed for this research and from mining the existing dataset it became clear that aggressive self-concept is an important overlooked aspect. Future research should refine indicators to assess aggressive self-concept. Generalisations from this investigation should thus be treated with caution.

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