



The Effect of Family Functioning on Aggressive Behavior in Adolescents in Medan City

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<p>Track Record Article Received : 12 December 2021 Publication: 25 January 2022</p>	<p style="text-align: center;">Abstract</p> <p>Aggressive behaviour in adolescents is an issue that has become a concern to mental health practitioners and educators. Aggressive behaviour is often found in big cities. Aggressive behaviour in adolescents also occurs in Medan city. Several previous studies have shown a relationship between family factors and aggressive behaviour. The purpose of the study was to determine the effect of family functioning on aggressive behaviour in adolescents in Medan city. Data were obtained from 263 middle-aged adolescents who lived in Medan city with an age range of 15-18 years. Sampling was taken using a non-random sampling technique, namely the incidental sampling technique. In this study, data collection was carried out using a scale measuring tool, namely the aggressive behaviour scale and the family functioning scale. Data were analyzed using the simple regression method. The results showed a negative influence of family functioning on aggressive behaviour. From the results of this study, it can be concluded that the healthier the functioning of the family-owned by adolescents, the lower the tendency to display aggressive behaviour and vice versa, the more unhealthy the functioning of the family, the higher the propensity to engage in aggressive behaviour in adolescents. The suggestion from this research is that parents and adolescents must build and establish a harmonious relationship and play a good role according to their respective positions to create a family that can function healthy which will have an impact on decreasing aggressive behaviour</p> <p>Keywords: <i>Aggressive Behaviour, Family Functioning, Adolescent, Medan</i></p>
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1. Introduction

Educators and mental health practitioners view the phenomenon of aggressiveness in adolescents as a problem that requires special attention (Shahzad et al, 2013). Aggressive behavior causes many negative impacts for the victim as well as the perpetrator. More aggressive adolescents display lower academic performance, psychosocial adjustment problems, absent from school, and various of mental health problems including high rates of depression. Meanwhile, adolescents who are victims experience depression, low self-esteem, anxiety, stress, headaches, sleep difficulties, and the desire to skip school (García-Sancho et al., 2014).

Cases of aggressive behavior can also be found in Medan city. As the capital of North Sumatra Province and the third largest city in Indonesia, brawls between students also often occur in Medan city (Setyawan, 2014). According to Setyawan (2014), the phenomenon of student violence and fights, especially in big cities, is a complex problem. This condition involves many

factors, such as sociological, cultural, psychological factors, educational policies (such as a tight curriculum), and other public policies such as public transportation and urban planning.

Buss & Perry (1992) define aggressive behavior as a behavioral tendency that aims to harm others physically and psychologically in expressing negative feelings to achieve the desired goal. Behavior aimed to hurt others displayed through physical aggression, verbal aggression, anger, and hostility. Meanwhile, Myers (2010) explained that aggressive behavior is an act of violence that can be done physically or verbally.

The study found that family factors can influence the occurrence of aggressive behavior. The family is not only the basic unit of society, but also the first place for individuals to grow both physically and mentally. A family is made by each family member where the family influences the growth of each family member and plays an important role in the social system. Every family member needs and influences each other (Gunarsa & Gunarsa, 2003).

In adolescence, adolescents experience increased growth both physically, emotionally, and cognitively so that adolescents become more independent and spending more and more time interacting with their peers (Santrock, 2003). However, adolescents still need to maintain balance in the family environment as a basis that can influence the process of learning the world and getting more lessons (Hong & Park, 2012).

Judging from the picture of the family today, Gunarsa and Gunarsa (2003) see that the family has lost a lot of function and meaning. For example, the function of education is now handed over to schools, the function of recreation has shifted from the family to places of entertainment outside the home, games are more often played outside the home, and family members no longer occupy a meaningful place for other family members because the bond of mutual need is felt to be less needed. Therefore, the meaning, ties, and functions of the family are reduced. Seeing the fact that there is a shift in family roles at this time, this study focuses on looking at the effect of family functioning on aggressive behavior in adolescents. In addition, the family functioning variable was chosen because family functioning does not only look at one-way interactions, such as only looking at the relationship between children and their parents. However, the construct of family functioning sees the family as a system and the relationship between the system will affect the development of each family member.

Family functioning is defined as the extent to which a family can carry out its duties and can fulfill physical, social, and psychological well-being for each family member (Ryan et al, 2005). Ryan et al (2005) identified six characteristics possessed by well-functioning and healthy families, namely the ability to solve problems, effective communication, appropriate role allocation, affective response, effective engagement, and behavioral control. According to this approach, adolescents

who grow up in families that can fulfill these roles feel satisfaction related to the fulfillment of psychological needs needed by adolescents.

The problem solving dimension is defined as the ability of the family to solve problems to maintain effective family functioning. Communication is defined as the verbal exchange of information within the family. The more often the communication is conveyed clearly and directly, the more effective the functioning of the family. Role is a repetitive behavior carried out by family members to fulfill family functions. A healthy family is a family that has a clear division of tasks to the right people according to their expertise so that it can be held accountable. Affective response is defined as the ability to respond to affective stimuli with appropriate feelings both in quality and quantity. Affective involvement is defined as the extent to which the family shows interest in activities or interests of family members. Meanwhile, behavioral control is defined as a pattern used by a family to cope with the behavior of family members.

Regarding family functioning, research by Dabaghi et (2017) found that family functioning was associated with aggressive behavior in adolescents. This relationship is related to the function of the family in recognizing social-emotional distress and danger and applying good parenting methods so that a well-functioning family can play a role in reducing and preventing aggressive behavior in adolescents. This finding is also in accordance with previous studies which found that aggression in children is associated with family functioning, such as a lack of proper monitoring of children, maladaptive patterns of interaction between children and parents, inconsistent and ineffective discipline, and the need for improvement. problem solving ability (Hanish & Tolan, 2001). In relation with the explanation above, the researchers are interested to explore the effect of family functioning on aggressive behavior in adolescents in the city of Medan.

2. Method

The data collection tool used a psychological scale, namely the family functioning scale and the aggressive behavior scale with the Likert model. The aggressive behavior scale is based on the dimensions of aggressive behavior proposed by Buss and Perry (1992) namely physical aggression, verbal aggression, anger, and hostility. The scale use five options of answers namely Never, Rarely, Sometimes, Frequently, and Always. The family functioning scale in this study use Siswati's (2014) which has modified by researcher. This scale includes the dimensions of family functioning, namely problem adjustment, communication, roles, affective responses, affective engagement, and behavioral control. The scale is in the form of a Likert model scale with four answer choices namely Strongly Disagree, Disagree, Agree, and Strongly Agree.

The methodology of data analysis used is the simple regression method where the assumption test, namely the normality test and linearity test, is fulfilled in this study. The normality test on the variables of family functioning and aggressive behavior was carried out by looking at the value of Z skewness and Z kurtosis with the help of the SPSS version 16 application for windows. The linearity test was performed using the ANOVA procedure by paying attention in the significance value of Linearity and Deviation From Linearity.

3. Result and Discusiion

Respondents in this study were adolescent who lived in Medan city aged 15 to 18 years. Based on the 263 youth who became respondents in the study, it can be obtained a description of the respondents based on gender, age, and religion.

Table 1. Research Respondent by Gender

Gender	N	Percentage (%)
Woman	147	55.89%
Man	116	44.11%
Total	263	100%

Based on the table, it can be seen that the majority of research respondents were female, 147 people (55.89%) and followed by male adolescents, amounting to 116 people (44.11%).

Table 2. Research Respondent by Age

Age (Year)	N	Percentage (%)
15	44	16.73%
16	68	25.85%
17	93	35.36%
18	58	22.05%
Total	263	100%

Based on table 4.2 above, it can be seen that the adolescents in this study came from the age range of 15-18 years. Most of the research respondents came from the age of 15 years, namely 44 people (16.73%) and followed by age 16 totaling 68 people (25.83%), age 17 totaling 93 people (35.36%), and age 18 totaling 58 people (22.05%)

Table 3. Research Respondent by Religion

Religion	N	Percentage (%)
Islam	202	76.80%
Protestant	38	14.44%
Catholic	23	8.74%
Total	263	100%

Based on table, it can be seen that the research respondents have different religions. Most of the respondents in this study adhered to Islam as many as 202 people (76.80%), followed by Protestants as many as 38 people (14.44%), and Catholic as many as 23 people (8.74%).

The hypothesis in this study is that there is an influence of family functioning on aggressive behavior in adolescents in Medan city. The results of hypothesis testing show:

Table 4. Analysis of the Effect of Emotional Quotient on Agressive Behavior

Model	R	R Square	F	Sig.
1	.456 ^a	.208	68.579	.000

The table above shows the correlation coefficient (R) of 0.456 and the value of the determinant coefficient (R²) of 0.208. This value indicates that the effect of family functioning on aggressive behavior is 20.8%, while the rest (79.2%) is due to other factors not examined in this study. Based on the regression analysis, it can be concluded that the hypothesis in this study is accepted, which means that there is a negative influence of family functioning on aggressive behavior in adolescents. The results also show that the direction of influence given by family functioning on aggressive behavior is negative. This shows that the higher the functioning of the family, the lower the aggressive behavior.

Research by Avci and Gucray (2010) also found that there are differences in family functioning in adolescents who are violent offenders and adolescents who are not violent offender. In general, family functioning in adolescent perpetrators of violence was found to be lower than family functioning in adolescents who were not perpetrators of violence. In addition, this study found that the level of anger expression in the families of violent adolescents was found to be higher than that of non-violent adolescents.

The influence of family functioning on aggressive behavior can also be seen from the influence of family functioning on social skills in individuals. Research by Zubrick et al (2000) found a positive relationship between family functioning and social skills. Low social skills can lead to aggressive behavior (Baron & Bryne, 2005; Tremblay, Vais, & Petitclerc, 2008). Low social skills can have an impact on behavior that tends to be closed to others, less able to control emotions, display hostile prejudice when faced with ambiguous social stimuli so that it can lead to aggressive behavior. In addition, the lack of skills in responding to other people's statements both verbally and nonverbally as well as a tendency to issue harsh words can lead to fights and involvement in violence.

Data analysis was also carried out to determine the dimensions of family functioning that had the most influence on aggressive behavior. This analysis use multiple regression analysis.

Table 5. Dimensions of Family Functioning Most Influential on Aggressive Behavior

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
1	.458 ^a	.210	.207	10.691	.210	69.389	1	261	.000
2	.491 ^b	.241	.236	10.497	.031	10.742	1	260	.001

Based on the table, it can be seen that the behavioral control is the dimension of family functioning that has the most influence on aggressive behavior. The effective contribution of the behavioral control dimension to aggressive behavior is 21%. From the table it can also be seen that only two dimensions of family functioning have an effect on aggressive behaviour, that is behavioral control and affective response. Meanwhile, the other four dimensions, namely problem solving, communication, roles, and affective involvement had no effect on aggressive behaviour ($p > 0.05$).

Based on data analysis, it can be seen that behavioral control is the dimension of family functioning that has the most influence on aggressive behavior. Ryan et al. (2005) stated that a healthy functioning family will teach values and apply behavioral standards that are used to interact to fellow family members and others outside the family. This is consistent with research by Saleem & Gul (2016) which found that unhealthy family functioning leads to weak social competence and vice versa. Dabaghi et. al. (2017) stated that if the right behavior has been taught and regulated in the family, the child will grow up with healthy behavior so that it will reduce involvement in aggressive behavior.

The dimension of affective response was also found to have an effect on aggressive behaviour in this study. In a healthy functioning family, family members will respond to the affective stimuli of other family members appropriately. Families can respond to positive emotions or negative emotions from family members appropriately (Ryan et al., 2005). According to Dabaghi et al. (2017), when the family can respond appropriately to the emotions of family members, a healthy emotional atmosphere is created so that it can prevent emotional suppression of family members and other harmful effects. According to Nayana (2013), adolescents who have families that function in a healthy manner will grow up to be stable individuals and are not easily influenced in relationships. Furthermore, Bhatia (2012) also concluded that a healthy relationship in the family will make adolescents feel safe because they believe that they are accepted by the family which in turn will have an effect on good adjustment skills so that adolescents can be well received by society.

4. Conclusions

Based on the research, it can be concluded that family functioning has a negative effect on aggressive behavior where the effective contribution is 20.8%. This shows that the healthier the functioning of a person's family, the lower the level of aggressive behavior they have. Vice versa, the more unhealthy the functioning of the family, the higher the level of aggressive behavior.

5. Suggestions

1. Other researchers can use subjects with more specific characteristics, such as adolescents who already display aggressive behavior or adolescents who join groups that are at risk of displaying high aggressive behavior, such as motorcycle gangs or other risky gangs.
2. Other researchers can use research subjects with more specific characteristics, such as teenagers who already display aggressive behavior or teenagers who join groups that are at risk of displaying high aggressive behavior, such as motorcycle gangs or other risky gangs.
3. Family functioning has a negative influence and becomes a protective factor for aggressive behavior. Therefore, parents can apply teaching and discipline patterns that are in accordance with the development and age of the child. In addition, parents must be able to meet the needs of children, both physical needs and psychological needs so that healthy family functioning can be achieved.
4. Adolescents are expected to respect parents and be cooperative towards the rules and values that have been set in the family so that a good interaction process occurs between parents and adolescents so that it has an impact on the creation of a family with healthy functioning.

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