

## EFFECTIVENESS OF VIDEO ASSISTED TEACHING MODULE ON ANGER MANAGEMENT AMONG ADOLESCENTS: LITERATURE REVIEW

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### ABSTRACT

Anger is symptomatic expression of emotional or interpersonal maladjustment in Adolescents Student; these problems can result from temporary stressors in the Students life. Anger remains one of the most significant problems facing our society today. In a world growing more crowded, with the pace of life increasing exponentially, there is growing potential for anger to play a destructive role on a large scale. Adolescent are dealing with the challenges of going through puberty, meeting changing expectations and coping with new feelings and emotions. And some kids may have to deal with things that their peers don't have to face such as the death of a family member or moving to a new town. Most adolescent meet these challenges successfully and grow into healthy adults while others have a hard time coping with their problems. There is a growing recognition that schools may play a significant role in producing psychopathology, especially due to the formative influences of school as normal as well as pathological development. It therefore become imperative to view the school's system from the perspectives of primary, secondary and tertiary prevention with reference to the child's mental health.

**KEYWORDS:** Anger, anger management, video assisted teaching.

### INTRODUCTION

Anger is an emotional state that varies in intensity from mild irritation to intense fury and rage. It is accompanied by physiological and biological changes, such as increases in heart rate, blood pressure, and levels of the hormones epinephrine and nor-epinephrine. Anger remains one of the most significant problems facing our society today. In a world growing more crowded, with the pace of life increasing exponentially, there is growing potential for anger to play a destructive role on a large scale. As per Central Intelligence Agency (2019) about 243 million Indian adolescents sheer a moral nature of aggressive behavior and violence. Anger in adolescence defined from both a physiologic and an emotional point of view, is an imbalance between environmental demands and a adolescence's coping resources that disrupts the equilibrium of the adolescence. Adolescent who are exposed to frequent images of violence through videogames, movies and television, will have a risk of anger expression. In addition adolescent who punished for their anger when they were young, might also be at higher risk for anger disorders later in life. They never

learn how to express the emotion properly or realistic manner.

### REVIEW OF LITERATURE

The review of literature had been done here under the following subheadings.

1. Literature related level of anger among adolescents
2. Literature related level of knowledge regarding anger management among adolescents.
3. Literature related to effectiveness of video assisted teaching module and meditation on anger management.

#### 1. Literature Related Level of Anger Among Adolescents.

A study was conducted to assess the level of anger on 957 school children using Rutter B scale which was to be completed by the class teachers in Bangalore. One hundred and forty-one children (14.6%) scored more than 9 points and were included in the second part of the study. Based on the instrument results and parental interview 45.6% of the children were estimated to have

anger, of which 36.5% had significant problem. Only 117 and 124 children turned up and were included in the analysis. Based on the screening instrument results and parental interview, 45.6% of the children were estimated to have anger, of which 36.5% had significant problems. It was noticed that neither the screening instrument nor the interview was able to detect all the problems. Scholastic under-achievement was found to be associated with maximum problems. Scholastic under-achievement can be a useful starting point of identifying children with anger. Close cooperative between school teachers, parents, and health care providers is essential to ensure healthy development of students.

A cross sectional study was conducted in Saudi Arabia, to determine emotional and anger among school going students aged 10 to 16 years. The investigator took 1488 samples (700 parents of private school and 788 parents of community school students). Strength and Difficulties Questionnaire was filled out by parents and school teachers for the same children. Demographic data of parents, teachers and children were also collected using a separate Performa. Result was a total of 675 parents agreed to participate in the study. The response rate was 45.3%. Assessment of children's mental health was conducted using Strength and Difficulties Questionnaire (SDQ). Parents rated 34.4% of children as falling under the "abnormal category on SDQ, slightly higher estimates 35.8% were reported by the teacher.

A longitudinal study was conducted on prevalence of anger and emotional problems among sixteen-years-old going students. The sample consisted of 1887 students who started primary level education within 6 months upon data collection. The sample represented the complete 1-year intake of all school going students in a northern German town of 254,000 residents. The data were collected with standardized parent questionnaires. They found that the 6 months prevalence of anger and emotional symptoms was 12.4%. They concluded that level of psychopathology in school going students was already as high levels seen elsewhere in school going students.

A Study was conducted in Sri Lanka to assess the rates and distribution of anger in a sample of school-aged students in Sri Lanka and to identify the factors, including cultural, religious, economic, academic and familial influences, which are associated with emotional and anger. This exploratory study of anger adjustment in Sri Lankan students has produced results generally consistent with other international literature. The presence of anger managements in the Sri Lankan sample was associated with the male gender, low socioeconomic background and lower academic performance. Unique to this study were the interactions between the Tamil ethnic group, Hindu religion and the significantly higher level of reported anger compared with other ethnic groups, suggesting possible influences

of the long-running 'ethnic crisis' in Sri Lanka and the desirability of further exploration of this phenomenon.

A study was conducted on Chinese primary school children to determine levels of anger and to explore key determinants relevant to the Chinese context. The investigator examined 2,203 child-parent pairs and administered a child self-completion questionnaire to children aged 7-13 and Rutter Parent Scales to their parents in nine primary schools. Result showed that 13.2% of the children (16.4% of boys, 9.4% of girls) had a anger. Girls manifest more emotional problems (5.3 vs. 2.3%) and boys more conduct problems.

A Study was conducted in Sweden to assess cognitive functions in children who were reported by their teachers and parents to exhibit learning and/or anger, especially in the field of attention. In connection with then scheduled school health examination in grade 4 in one municipality, 591 children were screened through questionnaires and interviews with the parents and teachers. Those with positive rating scores were subjected to further cognitive assessments, including the WISC III. A cluster analysis based on cognitive data was performed. The result was about one third (175 children) of the population obtained a positive rating score, indicating significant anger and/or learning problems. Of these, 144 children were assessed. Cluster analysis revealed six clusters. Within these clusters, two large groups were identified: one group displayed generally low cognitive abilities and one group was dominated by attention deficit symptoms. It was found a surprisingly high number of positive rating scores in the cohort (30%). This could be explained, on the one hand, by known developmental disorders, such as mental retardation and learning disabilities, and pervasive developmental disorders, and, on the other hand, by prevalent milder cognitive dysfunctions that, in combination with inappropriate demands, seemed to lead to overt anger.

## 2. Literature Related Level of Knowledge Regarding Anger Management Among Adolescents

A clinical study was conducted in 2014 to assess the effectiveness of teaching programme for the care takers of children admitted with minor mental health disorders in the Child Psychiatry wards of Central Institute of Psychiatry, Ranchi. Total of 80 samples were selected by convenient sampling technique. The outcome of the study proved marked increase in the knowledge level of the caretakers after the intervention.

Bhanwara Priyesh conducted a study on knowledge among adolescents related to anger in India. The study was conducted in selected schools of Pune city. In the present study the sample comprised of 60 people. A structured questionnaire knowledge regarding anger was prepared to study the sample. Descriptive and inferential statistics had been used to analyze the data obtained through interviews. The result shows the knowledge majority (93.34%) of the school teachers in pre-test of

the experimental had an average knowledge score whereas in post-test a majority 75% of the school teachers had a good knowledge score. This study indicates that the planned teaching is effective in increasing the knowledge of adolescents regarding anger management.

A study was conducted on knowledge among adolescents related to anger in Vallioor. This study was conducted in selective schools of Vallioor city. In the present study the sample comprised of 30 samples. During pre-test anger expression score, the majority of the sample subjects 16(53.33%) had moderate level of anger, 14 (46.67%) had mild level of anger. In post-test 10(33.33%) had irritation, 14(46.67%) had mild level of anger, 6(20.00%) had moderate level of anger. The study findings shows that the pretest mean score was 46.97, standard deviation score was 7.87 and post-test mean score was 26.67, standard deviation score was 7.78. This study indicates that the intervention is effective among adolescent regarding anger management.

A descriptive study was conducted in 2018 among 74 students of 7<sup>th</sup>, 9<sup>th</sup> and 11<sup>th</sup> grade of a rural school district in Pennsylvania to investigate the variables that influenced the expression of anger in adolescents. Results revealed that students (22.9%) with lower average grades were observed to report higher levels of reactive anger, instrumental anger, anger control than those students (70.3%) indicating higher average grades; 43.2% of students who reported negative friend's behaviour had a significantly less reactive anger, instrumental anger and total anger along with significantly more anger control.

A study was conducted in 2017 to examine adolescent anger to determine if adolescent anger changed over time and if there were gender differences. In a cohort, adolescents were measured twice, once during the freshman year and again in the senior year of high school using Anger Index, a questionnaire developed by Siegel. The findings indicated that anger score appeared to be stable over time for both boys and girls, and there were gender differences on individual responses for several times indicating that certain dimensions of anger may differ from over time by gender.

A study was conducted on knowledge among adolescents related to anger in, Karnataka, Bangalore. This study was conducted in selective schools of Karnataka, Bangalore. In the present study the sample comprised of 60 samples. The existing knowledge of high school students revealed that there was a lack of knowledge in all aspects of knowledge regarding factors influencing psychosocial problems among adolescence. Overall post-test mean knowledge score (16.53% & SD of 3.02%) was higher when compared with pre-test knowledge score (8.07% and SD 2.57 %). The statistical paired 't' test implies that difference in pre-test and post-test knowledge found

statistically significant at 5% level indicating the effectiveness of structured teaching programme.<sup>[37]</sup>

### 3. Literature Related to Effectiveness of Planned Teaching Programme on Anger Management

A pre experimental research study was carried out to evaluate the effectiveness of a planned teaching programme on anger management for adolescent students. A total of 60 adolescents students of 12 to 15 years of age were drawn by multiple sampling techniques (i.e. 20 from class 7<sup>th</sup>, 20 from class 8<sup>th</sup> and 20 from class 9<sup>th</sup>). Data was collected using Visual Analogue Scale (VAS) and Adolescent Anger Checklist (AACL). Pretest data collection was followed by five days anger management programme and post-test assessment with the same tools. There was significant decrease in anger levels in D1 'intensity', D2 'frequency', D 'mode of expression', D4 'duration', and D5 'effect on inter personal relationships'. The reduction in the level of anger was seen through the mean score comparison between pre-test and post-test. The mean difference between the pre- test and post- test anger level was 19.10. In order to find the difference statistically "t" value was computed ( $t_{59} = 15.96$ ) showed that the tabulated t-value (df =59) was less than calculated t-value. The mean difference between pretest VAS and AACL was -.0005 and post-test mean difference was -.0015.

A Study was examined to assess the effectiveness of an eight-session psycho educational anger management programme for adolescent aged 13- 18 years. One hundred and seventeen children were allocated into two groups, the intervention group ( $n = 56$ ,  $M = 7.75$  years, 27 boys, 29 girls) and the control group ( $n = 61$ ,  $M = 7.92$  years, 29 boys, 32 girls). Children in both groups completed prior to and at the completion of the intervention: (a) the Anger Response Questionnaire (Miers et al., 2007) and (b) the Strengths and Difficulties Questionnaire (Goodman, 1997). The results showed that anger management increased in the intervention group – specifically, there was an increase in assertion, social support, rumination, avoidance and diffusion and a decrease in direct anger, whereas self-reported anger, social and emotional difficulties decreased. The findings are discussed in reference to previous studies that examined the effectiveness of anger management interventions for children.

A study was conducted in Salem to evaluate the effectiveness of teaching programme on knowledge of adolescents regarding anger management of hyperactive students. The sample selected for the study was cohort group of 40 teachers, teaching from 1st to 7th standard of selected private schools. A structured questionnaire with 40 items to assess the knowledge was prepared and pre-test was conducted on 1st day, after obtaining the written permission. Planned teaching programme in the same day after pre-test and the post-test was conducted on 9th day. The study results revealed mean difference between

pre-test (14.6) and post-test score (30.5) and the difference was significant ( $t=16.03$ ,  $p<0.01$ ).

A study to assess the effectiveness Mindfulness meditation techniques are increasingly being used to treat problematic anger and aggressive behaviour, and yet the evidence bases to support the effectiveness of these methods remains limited. This paper describes a trial of a mindfulness meditation intervention delivered to technical college students in Thailand. A total of 40 students received the intervention and changes on a series of self-report assessments of anger expression and violent behaviour were compared with those of a group of 56 students who did not receive the intervention. The intervention did not appear to lead to major reductions in self-reported anger or violence, although qualitative data elicited from interviews with participants suggested that the students had improved their self-regulation skills and developed greater self-awareness. It is concluded that this type of intervention may have value in preventing violence amongst Thai youth, but that more trials and stronger evaluation designs are needed to establish this.

A study was conducted to assess the effectiveness Meditation is an interactive process among mind, body and behaviour, in which emotional, mental, social, spiritual and behavioural factors can directly be affected. Guided mindfulness meditation is a powerful technique for facilitating healing and growth toward autonomy by helping adolescents connect to their inner voice. This technique may be especially useful in the adolescent search for self-awareness, meaning, and life purpose. The main goal of mindfulness meditation is the development of an observant self that learns about one's actions, thoughts, and feelings from a non-judgmental perspective. It consist four stages: (1) physical relaxation, (2) independent mindfulness meditation, (3) guided meditation calling on inner voice, and (4) connecting with inner voice. Mindfulness meditation has proven effective in reducing psychological stress, negativity, anger and aggression; it is a tool for awakening and guided mindfulness meditation in mediating aggression, developing one's conscious and thereby modifying one 'thoughts. This review examines the significance of both external and internal aggressive behaviour and youth suicide.

A study was conducted in 2018 to develop and evaluate an anger management intervention for fourteen 13–14-year-old boys in Boston. The intervention was developed to incorporate aspects of cognitive behavioural therapy used in previous anger management interventions along with how the process of gender role socialization contributes to boys' expression of anger. The goal of the intervention was to teach specific skills regarding handling anger and expressing emotions in an effort to prevent problems related to anger management. Descriptive data indicated that the participants' knowledge about their emotions and anger increased, and

that they learned skills to appropriately handle their anger.

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