

AWARENESS ON ANGER MANAGEMENT AMONG ALLIED HEALTH SCIENCE STUDENTS

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Abstract

Introduction: Anger is one of the prevalent behavioural problems commonly seen amongst younger and people around them. Anger can lead to aggressiveness in a person. Anger can lead to many problems if it's not controlled properly at the right time such as hurting reputations, destroying relationships, limiting opportunities and can even damage our health. Frustration or feelings excluded from something significant are common causes of anger. Anger is regarded as a protective reaction to any form of vulnerability or fear. However, it can influence a person's choices, sour relationships, and hurt them in other ways.

Objective: To assess the level of awareness and understanding of anger management techniques among Allied Health Science Students.

Methods: A simplified version of the Personal Anger Assessment Scale will be included in a freshly created questionnaire. Students from Allied Health Science will be part of the study population. The participants of 18 to 20- year-old Allied Health Science students will be involved in the study. After being gathered, the data was statistically examined.

Expected outcome: The study aimed to assess the awareness and understanding of anger management among students. Almost 85 percent of the students have knowledge about how to control the anger. Our expected outcome is to reveal that AHS students are aware of how to control their anger.

Conclusion: The study concludes that awareness of the anger management among Allied Health Science Students was found to be satisfactory. But there is a need for the stress management session. While students acknowledge the importance of anger management, the results indicate that focused education and training programs are necessary to provide them with useful techniques. Through the development of conflict resolution, stress management, and emotional intelligence, educational institutions can assist students in creating healthy coping strategies. Consequently, this can improve their health, patient care, and professions.

INTRODUCTION

Anger is one of the prevalent behavioural problems commonly seen amongst younger and people around them. Anger can lead to aggressiveness in a person. Anger can lead to many problems if it's not controlled properly at the right time such as hurting reputations, destroying relationships, limiting opportunities and can even damage our health. Frustration or feeling excluded from something significant are common causes of anger. Anger is regarded as a protective reaction to any form of vulnerability or fear. However, it can influence a person's choices, sour relationships, and hurt them in other ways.

People abilities, particularly interpersonal communication, are impacted by anger. It is significant to highlight that individuals who are easily agitated frequently originate from chaotic, destructive, and emotionally incompetent families. Unmanaged rage can have detrimental effects on one's physical and mental health as well as cause issues at work, in interpersonal relationships, and in one's general quality of life. Anger is a normal emotion that is necessary for survival, but too much of it can make it difficult to operate. Maladaptive rage in adolescents is caused by several variables, some of which include a lack of communication and problem-solving abilities as well as the inability to adjust to changing circumstances. Adolescents frequently struggle with adjusting to their shifting surroundings. Teenagers who struggle to solve problems are more likely to become irate when they encounter injustice or criticism.

Anger serves as an emotional barrier to communication, impairing brain function and preventing logical discourse, which in turn prevents constructive problem-solving. Anger-related problems are becoming more prevalent in schools and universities worldwide. Aggression, violence, and behavioral and conduct disorders are all preceded by anger. Future acts of severe violence may result from unchecked rage.

One of the most common behavioural issues among young people and those in their immediate vicinity is anger. According to some theories, rage is a dysfunctional coping mechanism that leads to increased conflict and suffering for the individual. Recent conceptualizations, on the other hand, have concentrated on anger as an adaptive strategy for overcoming perceived dangers and obstructed goals. Healthy anger is distinguished from unhealthy anger based on how well the emotion meets the individual's basic requirements. Anger suppression and repression can be a contributing factor to sadness and anxiety. Relationships may also be impacted and thought, and behaviour patterns may change. This becomes a significant obstacle to society's ability to think rationally, which has unfavourable effects.

Anger is associated with issues including substance and alcohol misuse, emotional and physical abuse, criminal activity, inability to focus, irregular sleep patterns, feelings of insecurity, and self-harm. A number of management techniques have been associated with a decrease in verbal and Non disease-related negative anger, an improvement in angry emotions like blood pressure and heart anger regulation, and a significant decrease in diseases, asthma, headaches, and negative social behaviour's like bullying and conduct issues.

One emotion that is crucial to our day-to-day existence is anger. Despite being universal, rage is interpreted and expressed differently depending on a number of things. According to one definition, anger is a powerful feeling that arises when someone feels threatened, frustrated, or unfairly treated. It might lead to their removing the upsetting stimuli.

Anger management looks at both the positive and bad elements of anger, even though it is the root cause of antagonism and has an impact on self- respect. While some researchers have examined the connection between depression and anger suppression, others have found a strong correlation between rage and somatization disorders, anxiety, and depression. Rage has long been known to be a significant predictor of suicide, and many individuals who have rage outbursts also suffer from severe anxiety or panic. Additionally, repressing anger has been linked to a number of medical conditions, including cancer, coronary artery disease, and hypertension. Anger is one of the least studied emotions, even though it has many detrimental effects. To the best of our knowledge, no research has been done on anger in doctors, and studies of the interactions and effects of anger in social situations are restricted to a small number of disciplines and occupational groups. According to earlier research, doctors are more likely than the general population to experience a variety of mental health issues, including those that maybe connected to anger. For instance, doctors have a greater suicide rate than other professionals with the same degree of education, and their risk of suicide has been found to be twice that of the general population.

Anger is one of the least studied emotions, despite the fact that it has many detrimental effects. To the best of our knowledge, no research has been done on anger in doctors, and studies of the interactions and effects of anger in social situations are restricted to a small number of disciplines and occupational groups. According to earlier research, doctors are more likely than the general population to experience a variety of mental health issues, including those that may be connected to anger. For instance, doctors have a greater suicide rate than other professionals with the same degree of education, and their risk of suicide has been found to be twice that of the general population.

Furthermore, suicide rates differ by medical specialty; compared to doctors in other disciplines, ophthalmologists, anaesthesiologists, and psychiatrists have greater suicide rates. Among doctors, affective disorders, such as depression, are the most common psychiatric diagnosis. The incidence of depression never reaches the population mean, even declining with age, years of medical practice, and academic standing.

Marital and family issues are another issue that doctors deal with. Compared to other professional groupings, physicians had a higher divorce rate (50%) and divorce risk (29%). It has been proposed that these rates may have been impacted by the psychological dynamics present as well as the long workdays and stress of being a doctor. The causes influencing rage need to be thoroughly investigated because it has known implications on doctors' mental, physical, and social health. Physicians' anger can have an impact on patients and result in incorrect or subpar therapy or noncompliance with treatment. Our clinical observations show that although surgeons are better at controlling their anger, they nonetheless experience it more than internists. We speculate that doctors working in various medical specializations may display their displeasure in different ways. It is our opinion that this is the first noteworthy study to examine anger and the circumstances that lead to it among doctors.

AIM OF THE STUDY

- The study's goal is to ascertain how well-informed AHS students are about anger management.

OBJECTIVES

- To assess the level of awareness of anger management among Allied Health Science Students.
- To assess the understanding of anger management technique among Allied Health Science Students.



MATERIAL AND METHODS

Study type:

Qualitative study

Study design:

Cross sectional study

Sample Size:

150 students

INCLUSIONS:

- Students within the age range of 18 to 20 years old.
- Individuals agree to participate.
- Those who are willing to participate can fill the personal anger assessment form.
- Male and Female sex.

EXCLUSIONS

- Students who are not willing to participate.
- Students from non-health related courses.
- Individuals with a history of any psychological conditions.

Study Area: Allied Health Science Block

Data Collection Method: Online Google Form

Questionnaire: Personal Anger 0Assessment

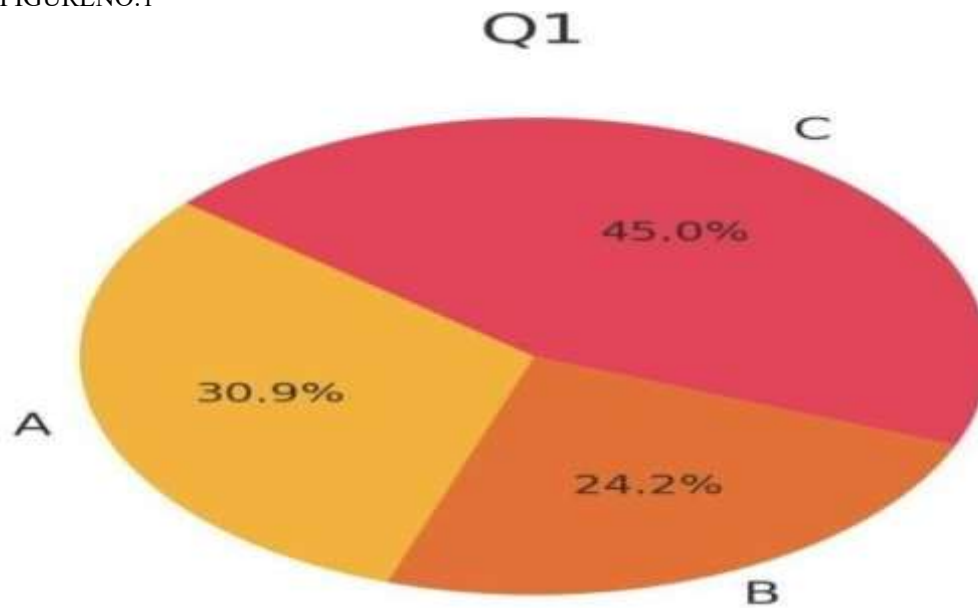
RESULT:

Around 92.7 % of participants doing well, but can improve, 5.3% of participants know how to handle anger, 2.0% of participants can't able to control their anger. (Figure 1). Option A. I have serious argument with my loved one sometimes for no reason (30.9%), option B. I think most people would think I handle my anger well (24.2%), option C. When I am angry with someone I am quickly and respectfully able to tell him or her why (45.0%) (Figure 2). Option A . I fly off the handle quickly (18.8%), option B. Sometimes it takes me longer than I'd like to get over being angry (34.9%), option C. I am very good at being quick to talk to someone who offends me so we can work out the issue (46.3%). (Figure 3). Option A. I find it very hard to forgive someone who has done me wrong (45.0%), option B. I occasionally feel regret about how I express my anger (30.9%), option C. I simply let bygones be bygones (24.2%). (Figure 4). Option A. I take frustration so badly that I can't put it out of my mind (44.6%), option B. Wish I had some better strategies or idea's for taking care of the anger I feel (31.1%), option C . Little things don't bother me very much (24.3%). (Figure 5). Option A. I have been so angry at times I couldn't even remember some of the things I said or did (39.9%), option B. I am usually able to figure out what it is that makes (40.5%), option C. I consistently find appropriate outlets for my anger (19.6%). (Figure 6). Option A. I have said malicious things about others to get back at them when I am angry (12.8%), option B. I don't generally being angry with others (51.0%), option C I really if even raise my voice in anger (36.2%). (Figure 7).

Option A. I have had trouble on the job because of my temper (10.0%), option B. My temper has caused problems with loved ones but , we usually seem to work it all out (55.3%), option C. If I have anything to do with it I don't let unresolved issues hang in the air with those I care about (34.7%). (Figure 8). Option A. I don't tend to get in many arguments (40.7%), option B. Some people are afraid of my bad temper (20.7%), option C. I have blurted things out in anger that I know I needed to apologize for right away (38.7%). (Figure 9). Option A. I often break things when I am angry (24.7%), option B. Though I doesn't always happen I usually recognize when I am angry (28.7%), option C. I have control over how I express my anger in the vast majority of situations (46.7%). (Figure 10). Option A. I sometimes feel like arguments with my loved ones just lead to more arguments and difficulties (33.3%), Option B. After getting angry am still able to act lovingly toward those around me (42.0%), Option C. My anger tends to come out suddenly in strong bursts that often appear uncontrollable to others around me (24.7%). (Figure 11). Option A. I just keep it to my self when I am angry (32.7%), Option B. I am usually able to resolve arguments with other people (32.7%), Option C. I am quick to forgive others who have offended me (34.7%). (Figure 12). Option A. People tend to think I over react when I am angry (18.8%), option B. After an argument , I often find myself wishing I had thought of a better way to respond (15.3 %), option C. I work hard to have all the facts before acting on my anger (13.9%). (Figure 14). Total score of (19-24) (8 members

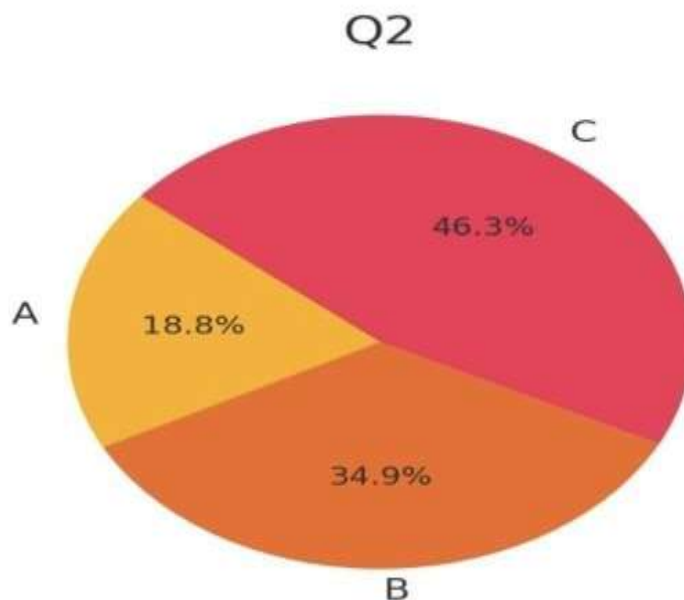
of participants know how to handle anger, (7–18) (139 members) of participants are doing well but can improve, (0 – 6) (3 members) of participants are can't control their anger.

FIGURENO:1

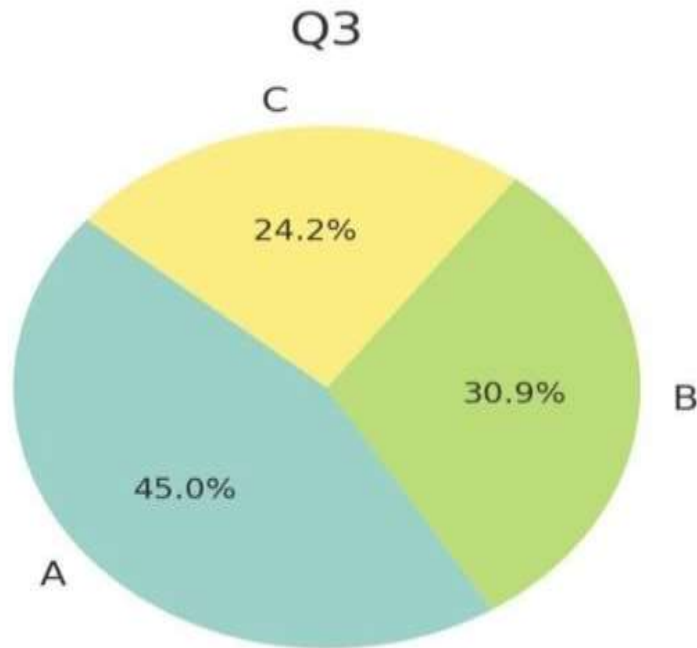


1. I have serious arguments with my loved one, sometimes for no reason. (A)
2. I think most people would think I handle my anger well (B)
3. When I am angry with someone, I am quickly and respectfully able to tell him or her why. (C)

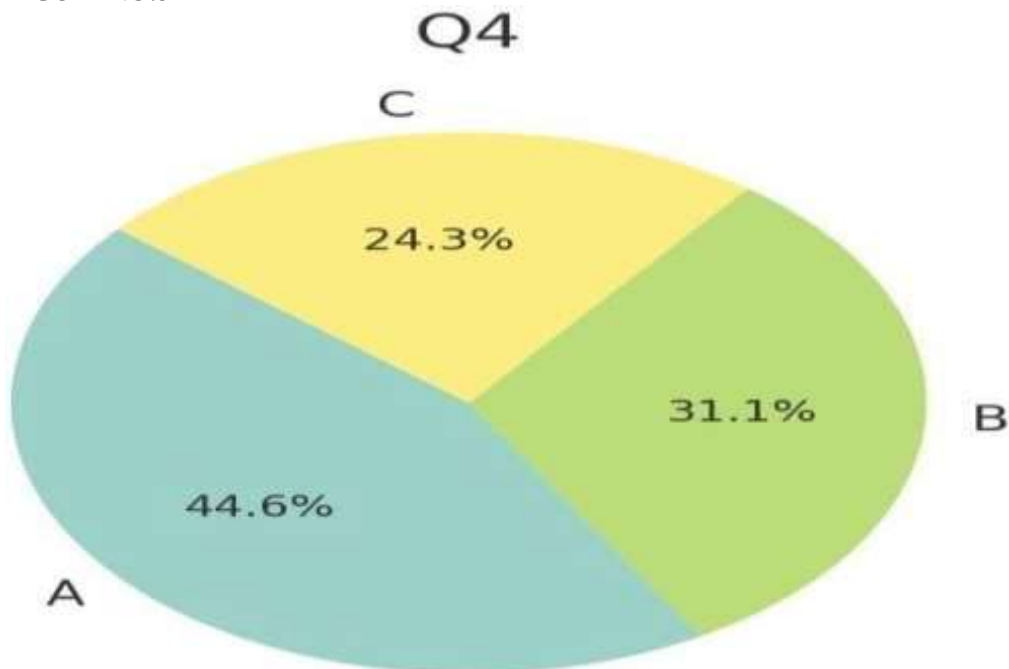
FIGURENO:2



1. I'm very good at being quick to talk to someone who offends me so we can work out the issue. (C)
2. If I fly off the handle quickly. (A)
3. Sometimes it takes me longer than I'd like to get over being angry. (B)

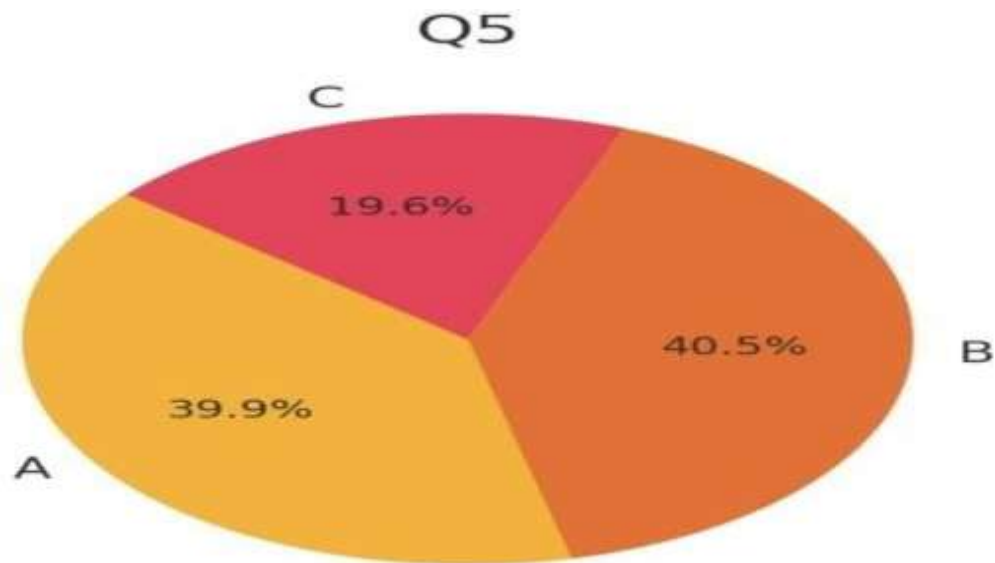


1. I occasionally feel regret about how I express my anger. (B)
 2. I simply let bygones be bygones. (C)
 3. If I find it very hard to forgive someone who has done me wrong. (A)
- FIGURE NO:3



1. Little things don't bother me very much. (C)
2. I wish I had some better strategies or ideas for taking care of the anger I feel. (B)
3. I take frustrations so badly that I can't put it out of my mind. (A)

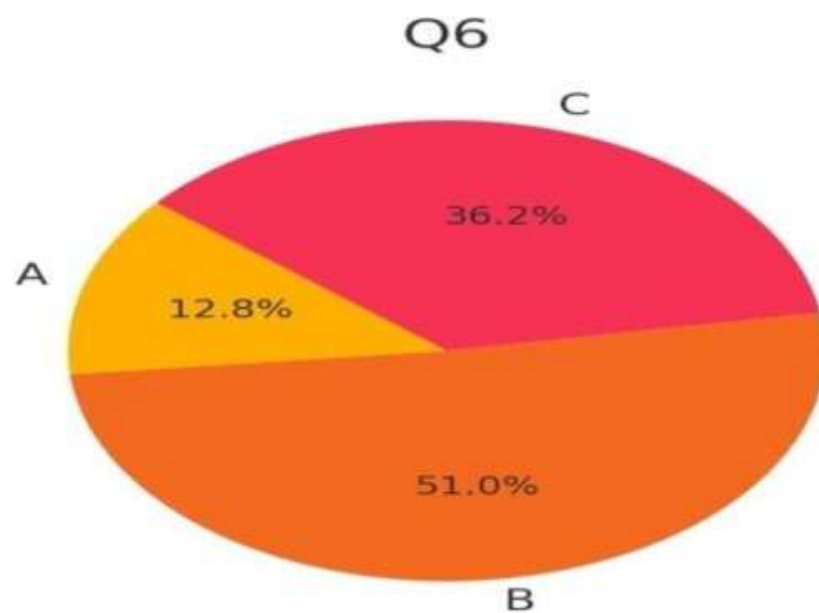
FIGURE NO:4



1. I've been so angry at times I couldn't even remember some of the things I said
2. I consistently find appropriate outlets for my anger. (C)
3. I'm usually able to figure out what it is that makes me angry. (B)

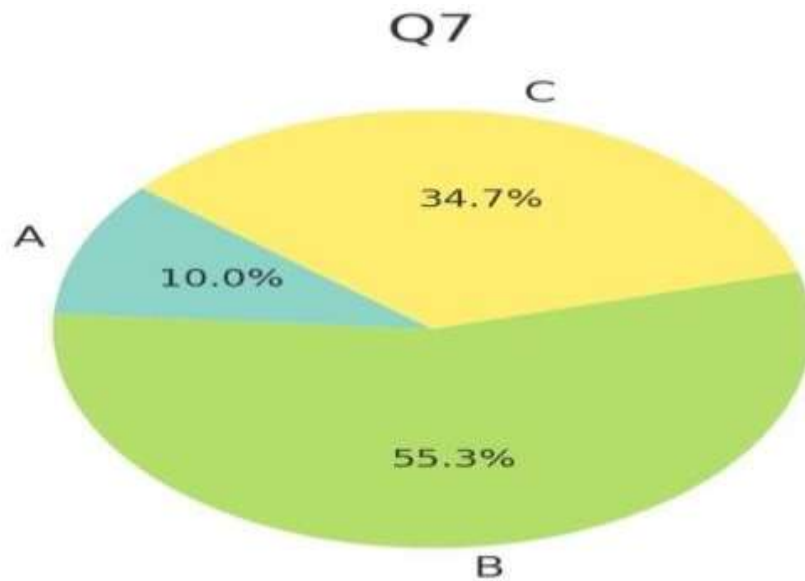
ordid.(A)

FIGURE NO:5

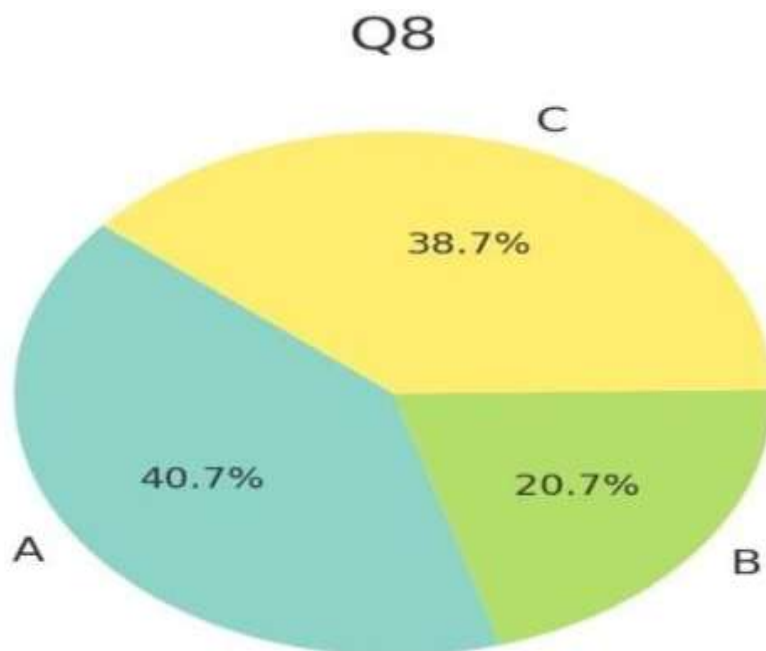


1. I don't generally like being angry with others. (B)
2. I have said malicious things about others to get back at them when I am angry. (A)
3. I rarely if ever raise my voice in anger. (C)

FIGURE NO:6

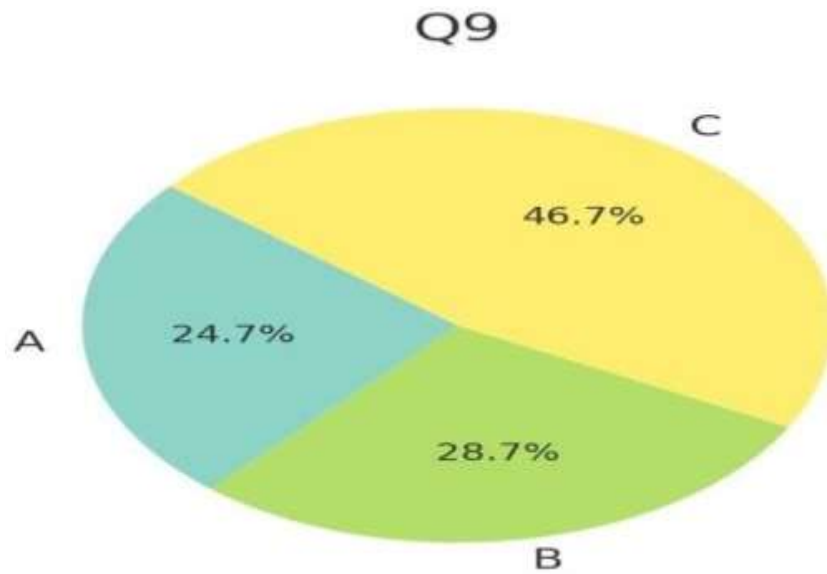


1. I've had trouble on the job because of my temper. (A)
 2. My temper has caused problems with loved ones, but we usually seem to work it all out. (B)
 3. If I have anything to do with it, I don't let unresolved issues hang in the air with those I care about. (C)
- FIGURE NO:7



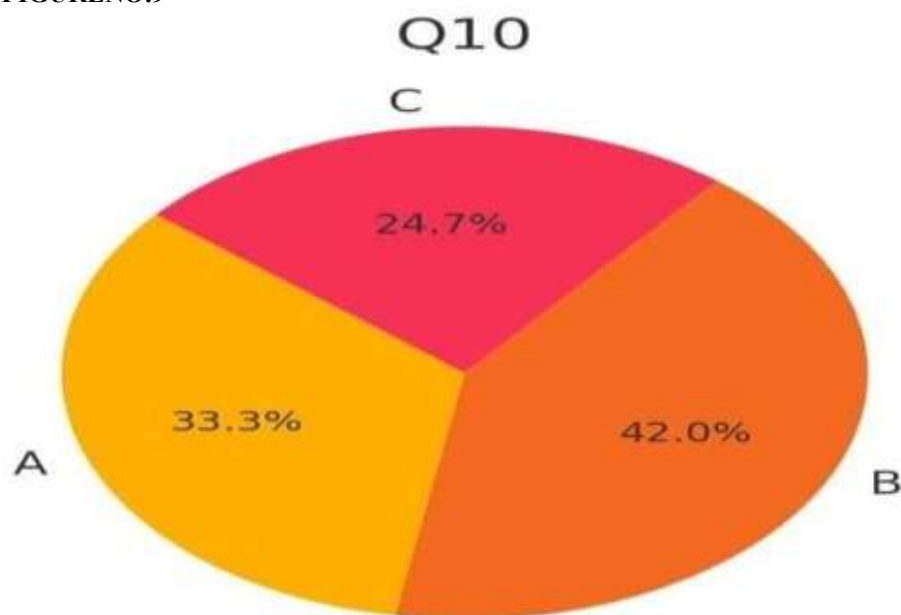
1. I don't tend to get in many arguments. (A)
2. Some people are afraid of my bad temper. (B)
3. I've blurted things out in anger that I knew I needed to apologize for right away. (C)

FIGURE NO:8



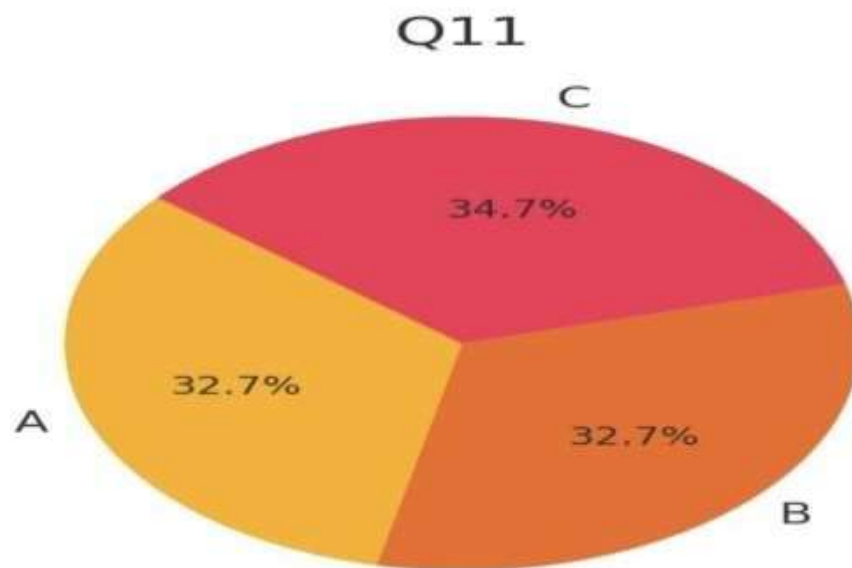
1. Thought it doesn't always happen, I usually recognize when I'm angry. (B)
2. I have control over how I express my anger in the vast majority of situations. (C)
3. I often break things when I'm angry. (A)

FIGURE NO:9



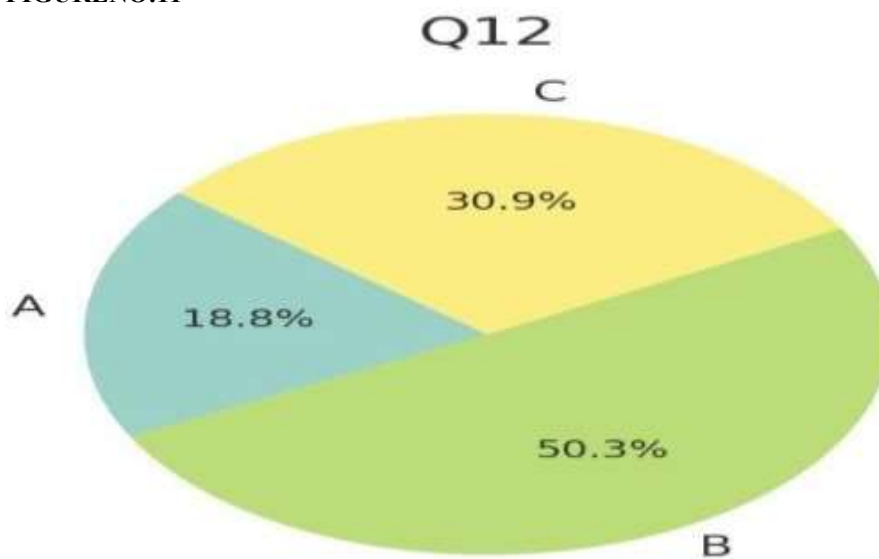
1. After getting angry, I'm still able to act lovingly toward those around me. (B)
2. Is it sometimes feel like arguments with my loved ones just lead to more arguments and difficulties. (A)
3. My anger tends to come out suddenly in strong bursts that often appear uncontrollable to others around me. (C)

FIGURE NO:10



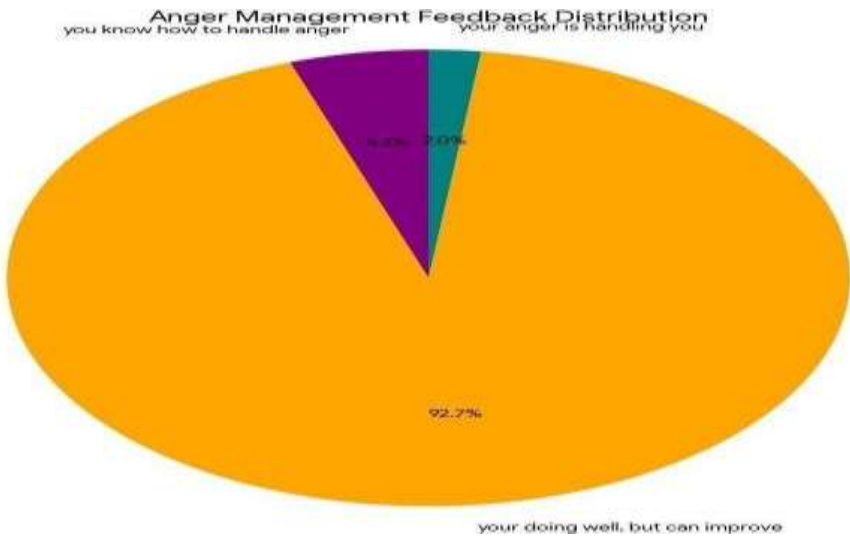
1. I just keep it to myself when I'm angry. (A)
2. I am quick to forgive others who have offended me. (C)
3. I'm usually able to resolve arguments with other people. (B)

FIGURE NO:11



1. After an argument, I often find myself wishing I had thought of a better way to respond. (B)
2. People tend to think I overreact when I'm angry. (A)
3. I work hard to have all the facts before reacting on my anger. (C)

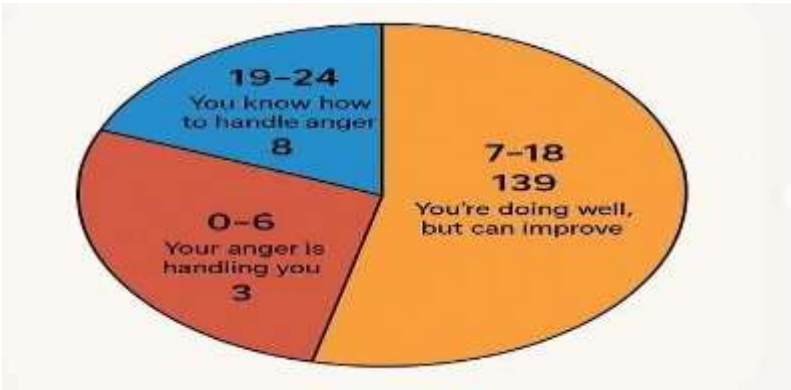
FIGURE NO:12



Overallpercentage

FIGURENO:13

TOTALSCORE:



Studentswhoscore19–24onthepersonalangerassessmentscale know how to handle the anger. Students who score 7–18 are doing well but can improve. Studentswhoscore 0–6, their anger is handling them.

FIGURENO:14

OneSampleTTest

Questions	Statistic	df	p
Q1	30.5	149	<.001
Q2	25.7	149	<.001

Q3	28.7	149	<.001
Q4	33.6	149	<.001
Q5	27.1	147	<.001
Q6	24.4	148	<.001
Q7	44.0	148	<.001
Q8	27.1	149	<.001
Q9	32.8	149	<.001
Q10	27.9	149	<.001
Q11	30.2	149	<.001
Q12	25.0	149	<.001

Note: $\mu_0 \neq 0$

DISCUSSION:

In the current research survey, students were requested to fill out a simplified version of the personal anger assessment scale to measure their mental score. The participants included 150 students of AHS. Students who score 19–24 on the personal anger assessment scale know how to handle the anger. Students who score 7–18 are doing well but can improve.

Students who score 0–6, their anger is handling them. Almost all the student of AHS can control their anger, but they have to improve their knowledge about anger control.

CONCLUSION:

The study concludes that awareness of the anger management among Allied Health Science Students was found to be satisfactory. But there is a need for the stress management session. While students acknowledge the importance of anger management, the results indicate that focused education and training programs are necessary to provide them with useful techniques. Through the development of conflict resolution, stress management, and emotional intelligence, educational institutions can assist students in creating healthy coping strategies. Consequently, this can improve their health, patient care, and professions.

SUMMARY:

Although anger is a normal emotion, improper management of it can have an adverse impact on a student's relationships, academic performance, and general well-being. It is essential to educate students about anger management in order to help them identify early warning indicators, understand the reasons behind their anger, and develop positive ways to cope. Students gain useful skills like deep breathing, mindfulness, problem-solving, and communication through awareness programs.

Additionally, these programs seek to foster emotional intelligence, lessen violent behaviour, and foster a more polite and positive atmosphere at college. Psychologists and educators are essential in helping students develop emotional and self-control. All things considered, raising adolescents' understanding of anger management skills enables them to resolve conflicts respectfully, make deliberate choices, and advance both academically and personally.

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