

RESEARCH ARTICLE

# Anger and Anger Expression Experience in Adolescents: A Qualitative Study

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## Abstract

*The aim of this study is to explore adolescents' experiences of anger and anger expression in depth. Conducted between October 2023 and December 2024, this study was carried out using a qualitative research approach. Within the framework of the interpretative phenomenological analysis (IPA) design, face-to-face and online individual interviews were conducted with 15 volunteer adolescents. The data obtained from the interviews were analyzed using thematic analysis, leading to the identification of four main themes: causes of anger, forms of anger expression, emotional and social responses following anger, and anger management and coping strategies. The research findings indicate that anger can have significant negative effects on adolescents' physical health, psychosocial development, and social relationships. Furthermore, it is emphasized that collaboration between families, teachers, and healthcare professionals is essential in ensuring the healthy expression and management of anger. This study may contribute to the development of supportive interventions for adolescent anger management. Strengthening anger regulation skills, increasing emotional awareness, and fostering effective coping mechanisms can help individuals manage anger in a healthier way. In this context, the research findings provide important insights for the development of educational and psychosocial support programs.*

**Keywords:** adolescent, anger, anger expression, interpretative phenomenological analysis

## Öz

*Bu araştırmanın amacı, adölesanların öfke ve öfke ifadesi deneyimlerini derinlemesine incelemektir. Çalışma, Ekim 2023 ile Aralık 2024 tarihleri arasında gerçekleştirilmiş olup, nitel araştırma yöntemi kullanılarak yürütülmüştür. Yorumlayıcı fenomenolojik analiz (YFA) deseni çerçevesinde, 15 gönüllü adölesan ile yüz yüze ve çevrimiçi bireysel görüşmeler yapılmıştır. Görüşmeler sonucunda elde edilen veriler, tematik analiz yöntemi ile incelenmiş ve dört ana tema belirlenmiştir: öfkenin nedenleri, öfke ifadesi biçimleri, öfke sonrası duygusal ve sosyal tepkiler ile öfke yönetimi ve başa çıkma stratejileri. Araştırma bulguları, öfkenin adölesanların fiziksel sağlığı, psikososyal gelişimi ve toplumsal ilişkileri üzerinde önemli olumsuz etkiler yaratabileceğini ortaya koymaktadır. Ayrıca, öfkenin sağlıklı bir şekilde ifade edilmesi ve yönetilmesi sürecinde ailelerin, öğretmenlerin ve sağlık profesyonellerinin iş birliği içinde olması gerektiği vurgulanmaktadır. Çalışma, adölesan öfke yönetimine yönelik destekleyici müdahalelerin geliştirilmesine katkı sağlayabilir. Öfke düzenleme becerilerinin güçlendirilmesi, duygusal farkındalığın artırılması ve etkili başa çıkma mekanizmalarının kazandırılması, bireylerin öfke ile daha sağlıklı bir şekilde baş etmelerine yardımcı olabilir. Bu bağlamda, araştırma bulguları eğitim ve psikososyal destek programlarının geliştirilmesi açısından önemli ipuçları sunmaktadır.*

**Anahtar Kelimeler:** adölesan, öfke, öfke ifadesi, yorumlayıcı fenomenolojik analiz

## Introduction

Adolescence is a period between childhood and adulthood characterized by physical, emotional, and psychological changes, and a search for identity. While some adolescents can cope with this challenging process with ease, others may experience difficulties in anger management, leading to the emergence of mental health issues (Lowth, 2015). Anger is one of the most potent vital emotions that arise in response to threats and are reflected in behaviors. Along with anger, a person may cope with their fears, but excessive and uncontrollable anger can impair their physical and cognitive health (Yadav, Yadav, & Sapkota, 2017).

Adolescents can experience intense feelings of anger due to hormonal changes, cognitive and neuropsychological changes, identity exploration, academic stress, changes in social relationships, lack of emotion regulation skills, conflicts with adults, the influence of social media, mental health issues (Moesarofah, 2024), and insecure attachment (Maalouf et al., 2022). Anger expression in adolescents can vary based on gender characteristics. For example, girls may express their anger by crying, yelling, or screaming, while boys may reflect their anger by fighting with others or physically harming others. (Anjanappa, Govindan, & Munivenkatappa, 2020b).

On the other hand, adolescents may exhibit behaviors such as sulking, ignoring, harming themselves and their surroundings (Anjanappa et al., 2020b), expressing anger verbally, or distancing themselves from the source of anger (Nasir & Abd Ghani, 2014). To cope with anger, adolescents may use strategies such as staying silent, watching television, going outside, playing with friends, eating, drinking water, washing their face, meditating, counting numbers (Anjanappa et al., 2020b), trying to stay calm, taking deep breaths, reminding themselves of the negative effects of anger, building self-confidence, or inviting the other party to a discussion (Nasir & Abd Ghani, 2014). When anger management is not achieved in adolescents, the risk of mental illness and suicide can increase (Daniel, Goldston, Erkanli, Franklin, & Mayfield, 2009; Weniger, Distelberg, & Vaswani,

2017). Therefore, effective management of anger is crucial.

Cognitive-behavioral therapy, problem-solving skills training, and communication skills training effectively reduce adolescent anger problems (Anjanappa, Govindan, & Munivenkatappa, 2020a). To resolve anger issues in adolescents, it is necessary to understand the causes that provoke their anger and to learn anger management strategies. School staff play a crucial role in identifying anger issues in adolescents. Teachers can take preventive measures to resolve conflicts by recognizing situations in the classroom that trigger students' anger and identifying their anger symptoms (Hymans, 2023). School health nurses can facilitate collaboration between children with anger issues, their teachers, and their families (Adana & Arslantaş, 2011) and take an active role in schools by cooperating with teachers in anger management programs (Anjanappa, Govindan, Munivenkatappa, & Bhaskarapillai, 2023). Therefore, increasing nurses' awareness of this issue is essential. Adolescents' expressions of anger may vary depending on cultural characteristics (Novin, Banerjee, & Rieffe, 2012).

This study examines the experiences of adolescents living in the eastern region of Turkey regarding anger and its expression. Our study is significant in demonstrating the impact of a specific region's sociocultural dynamics on adolescents' expression of anger. The study findings may provide scientific data for planning interventions related to anger management in adolescents.

## Method

This study examined adolescents' experiences with anger and anger expression. It employed interpretative phenomenological analysis (IPA), a qualitative research method aimed at deeply understanding individuals' experiences (Larkin, Shaw, & Flowers, 2019). The study provides a comprehensive framework for understanding and interpreting adolescents' anger and expression experiences.

### **The research team and reflexivity**

The research team consists of two researchers. The first researcher has completed a PhD in the field of mental health and psychiatric nursing and is currently working as a faculty member (assistant professor). The second researcher has worked for many years in pediatric nursing and is currently serving as a faculty member (assistant professor). Both the first and second authors have received training in qualitative research and have publications in international journals.

### **Study group**

The criterion sampling method, one of the purposeful sampling methods, was used to determine the study group. In this method, participants who meet predetermined important criteria are selected (Moser & Korstjens, 2018; Suri, 2011). In the study, adolescents who were thought to have experienced with anger and anger expression were selected as the study group.

Adolescents were reached and invited to participate through announcements shared on social media platforms such as Instagram and WhatsApp. Participants were verbally informed that participation in the study was entirely voluntary and that they could discontinue participation at any time without providing any explanation. Interview dates and times were arranged based on the adolescents' availability.

The criteria for participation in the study are as follows:

1. Residing in Eastern Turkey and speaking Turkish,
2. Being an adolescent aged between 13 and 18,
3. Expressing experience with anger and anger expression,
4. Actively using the WhatsApp application,
5. Voluntarily agreeing to participate in the study.

The exclusion criteria are as follows:

1. Having speech, language, or hearing impairments that could hinder effective communication,

A total of 15 adolescents participated in the study, and individual interviews were conducted with each of them. The interviews were conducted online via WhatsApp to ensure the participants could comfortably express their views.

### **Data collection**

The research was conducted between October 2023 and December 2024 with adolescents living in the eastern provinces of Turkey. The study employed an in-depth individual interview method. The interviews were held in quiet rooms where adolescents could comfortably respond. The study group was formed from adolescents who met the specified criteria. Adolescents were invited through social media announcements and the researchers' personal connections. A total of 23 adolescents initially agreed to participate, but 8 adolescents later withdrew from the study. Before the research began, a preliminary interview lasting 23 minutes was conducted with one adolescent. In this interview, the clarity and appropriateness of the questions were tested, and the data collected was not included in the analysis. Saturation is one of the key aspects to consider when conducting qualitative research. In practice, the researcher must continue data collection until no new information can be obtained from participants (Mwita, 2022). Data saturation was reached when the data began to repeat, and the study was completed with 15 adolescents. The duration of the interviews ranged from 14 to 26 minutes, depending on the adolescents' responses, with the average interview time calculated as 20 minutes. The semi-structured interview form used in the study was prepared based on the literature and reviewed with the opinions of two experts. During the interviews, probing questions such as "Can you elaborate on this situation?" were used to encourage adolescents to detail their feelings and experiences (Table 1). The interviews were video-recorded and then transcribed verbatim. The research data were collected by the first researcher (HS).

**Table 1. Interview guide**

| <b>Sociodemographic Characteristics</b>  |
|--|
| At the beginning of the interview, adolescents were asked about sociodemographic information such as age, gender, and class. |
| In what situations do you get angry?   |
| Can you describe an event recently that made you angry?  |
| What do you do to control your anger?  |
| How do you typically react when you are angry?   |
| How do your angry moments affect your life, especially your relationships with family and friends?                           |
| How do you generally feel after expressing your anger?   |

### Validity and Reliability of the Study

In order to maintain a high level of reliability in the study, the four main criteria of Lincoln and Guba (1985) were considered. To assess whether the credibility criteria were met, the findings obtained from the analysis of the interviews were shared with two adolescents with similar educational levels, and their approval was obtained. To achieve the transferability criterion, adolescents with experiences related to anger and anger expression were selected, as this characteristic ensures the identification of adolescents appropriate for the study's purpose. Purposive sampling was used to select adolescents who fit the study's requirements and research topic, and the adolescents were identified based on their previous experiences or knowledge of the subject. Detailed information about the research process was provided to meet the dependability criterion. In line with the confirmability criteria, direct quotes (descriptions) from adolescents were included in the study results before the analysis (Lincoln & Guba, 1985). The two researchers independently determined codes to increase internal reliability. To enhance internal validity, the research questions in the semi-structured interview form were reviewed by two experts with a doctorate degree in psychiatry nursing and pediatric nursing, and for the results, the views of an expert with doctorate degrees in psychiatry nursing were obtained (Lincoln & Guba, 1985).

### Data Analysis

The qualitative research data obtained in the content analysis of the study were analyzed in four stages:

**Transcription and Data Verification:** Notes were taken by the researcher during the interviews, and video recordings were used. The obtained data were transcribed into written form. The video recordings were watched and listened to by two researchers, and the transcription was verified.

**Coding the Data:** The two researchers examined the collected information to determine what the adolescents' expressions conceptually meant. During the coding stage, qualitative data analysis was carried out according to the concepts identified, considering the study's purpose and conceptual framework.

**Identifying Themes:** Based on the codes identified in the study, themes were identified that allowed the data to be grouped under specific categories at a general level. When forming the themes, care was taken to ensure that similar concepts were grouped under the same theme so that they could form a meaningful whole.

**Organizing and Defining Data According to Codes and Themes:** During coding and identifying themes, direct quotes were taken from the adolescents' views, thoughts, and suggestions, which best emphasized their opinions without including the researchers' views or interpretations. These quotes were used to convert the codes into themes.

### Ethical Considerations

This research was approved by the Scientific Research and Publication Ethics Committee of Hakkari University, with the approval number 2023/112, dated 12.10.2023. Before the interviews, both verbal and written informed consent was obtained from the adolescents and their parents. Records and transcripts were stored on a password-protected device. The study was conducted in accordance with the Helsinki Declaration and National Research Committee ethical standards.

## Results

The mean age of the adolescents who participated in the study was 16.8. Of the participants, 73.3% (n=11) were male, and 26.7% (n=4) were female. In terms of grade level, 20% (n=3) were in 11th grade, and 60% (n=9) were in 12th grade. Regarding education, 6.7% (n=1) were not currently attending school, and 6.7% (n=1) were graduates. When examining smoking behavior, 46.7% (n=7) of the participants smoked, while 53.3% (n=8) did not smoke.

The findings related to the adolescents' demographic characteristics are presented in Table 2.

**Table 2. Distribution of Sociodemographic Characteristics of Adolescents (n=15)**

| Participant No | Age | Gender | Grade    | Smoking Status |
|----------------|-----|--------|----------|----------------|
| Ö1             | 17  | Male   | 12       |                |
| Ö2             | 17  | Male   | 12       | Exists         |
| Ö3             | 17  | Male   | 12       | Exists         |
| Ö4             | 17  | Male   | 12       |                |
| Ö5             | 16  | Male   | 11       | Exists         |
| Ö6             | 17  | Male   | 12       |                |
| Ö7             | 17  | Female | 11       |                |
| Ö8             | 17  | Male   | -        | Exists         |
| Ö9             | 16  | Male   | 11       |                |
| Ö10            | 16  | Male   | 10       | Exists         |
| Ö11            | 17  | Male   | 12       | Exists         |
| Ö12            | 17  | Male   | 12       | Exists         |
| Ö13            | 17  | Female | 12       |                |
| Ö14            | 17  | Female | Graduate |                |
| Ö15            | 17  | Female | 12       |                |

Four themes related to anger and anger expression experiences were identified in the adolescents who participated in our study (reasons for anger, anger expression, emotional reactions and social effects after anger, anger management, and coping strategies) (Table 3).

### Theme 1: Causes of Anger

#### Sub-theme 1: Individual Sources of Anger

Adolescents associated their anger with individual causes such as daily life's chaos, challenges, responsibilities, feelings of failure, stress load, and mental or physical exhaustion.

Some expressions from adolescent individuals:

*"Sometimes, for example, it happens when I can't find something for which I am looking. It happens to everyone; you put something somewhere and can't find it, making you angry. Let's say you get a low grade on a test; you get angry."* (Ö1)

**Table 3. Themes, sub-themes, and codes for adolescents (n=15)**

| Theme  | Sub-Theme                                  | Code  |
|--|--|---|
| Causes of Anger                                    | Individual Sources of Anger                | <ul style="list-style-type: none"> <li>• Daily life chaos</li> <li>• Life challenges and responsibilities</li> <li>• Feeling of failure</li> <li>• Stress load</li> <li>• Mental and physical fatigue</li> <li>• Unjust criticism and injustice</li> <li>• Lying</li> <li>• Things going wrong</li> </ul> |
|  | Social and Environmental Factors           | <ul style="list-style-type: none"> <li>• Disagreements about sharing responsibilities</li> <li>• Angry reactions from people around (fights, violence)</li> <li>• Social habits and inclination towards violence</li> <li>• Damage to personal belongings</li> </ul>                                      |
| Expression of Anger                                | Emotional and Physical Expression of Anger | <ul style="list-style-type: none"> <li>• Yelling and raising voice</li> <li>• Cursing and using foul language</li> <li>• Crying</li> <li>• Thoughts of physical violence</li> <li>• Self-harm</li> </ul>  |
|  | Damage to Objects and Environment          | <ul style="list-style-type: none"> <li>• Breaking and throwing objects</li> <li>• Breaking doors and windows</li> </ul>   |
| Emotional Reactions and Social Effects After Anger | Emotions Experienced After Anger           | <ul style="list-style-type: none"> <li>• Regret</li> <li>• Sadness</li> <li>• Guilt</li> <li>• Calming down/relaxation</li> <li>• Self-reflection and learning</li> </ul>   |
|  | Effects on Social Relationships            | <ul style="list-style-type: none"> <li>• Breakdown in family relationships</li> <li>• Breakdown in social relationships</li> </ul>  |
| Anger Management and Coping Strategies             | Calming Methods                            | <ul style="list-style-type: none"> <li>• Listening to music</li> <li>• Physical activity (walking)</li> <li>• Smoking</li> </ul>  |
|  | Self-Regulation and Control Mechanisms     | <ul style="list-style-type: none"> <li>• Self-control</li> <li>• Thinking and evaluating</li> <li>• Self-talk (self-awareness)</li> <li>• Changing the environment</li> </ul>   |
|  | Communication and Emotional Expression     | <ul style="list-style-type: none"> <li>• Clearly expressing feelings</li> <li>• Apologizing</li> </ul>  |

*"In daily life, now due to the stress in our lives, I mean, because of the difficulties in our lives, it's a bit stressful. Also, stress itself brings anger."* (Ö9)

"I get very stressed because I get really tired of this. Sometimes crying is involved; that's why I get pretty stressed, usually." (Ö15)

### **Sub-theme 2: Social and Environmental Factors**

Adolescents highlighted situations such as unjust criticism and injustice, lying, things going wrong, disagreements over sharing responsibilities, social habits, a tendency towards violence, and damage to personal belongings.

Some expressions from adolescent individuals:

"I am actually a person who is against fighting, but when I get really angry, I express my reaction by shouting, raising my voice." "I mean, here, when they get angry, it's always fighting, violence." (Ö3)

"I had a big argument there, it really got heated. That's why I encountered such an event. I mean, here, when you get angry, it's always fighting, violence. Constant fighting, constant fighting, they try to scare you." (Ö3)

"People around me, for example, when they get angry, they hit, they fight." (Ö4)

"My excuse is I get angry when they go out, we argue. Since all the responsibility was on me, I started interfering with everything, we argued about everything. That's why. When the argument is over, I actually calm down. After that, I think about what I did." (Ö7)

"For example, when someone criticizes you unfairly, I can't handle the unfairness." (Ö1)

"I get angry when someone lies, when something goes wrong, or when I can't do something." (Ö12)

"I really don't like people who mess with my phone, my closet, or take my personal belongings." (Ö4)

"For example, even a tiny thing, especially when something damages my personal belongings, it makes me angry." (Ö7)

## **Theme 2: Expression of Anger**

### **Sub-theme 1: Emotional and Physical Expression of Anger**

Adolescents usually express anger through shouting, raising their voices, swearing and using foul language, crying, thoughts of physical violence, and self-harm.

Some expressions from adolescent individuals:

"I shout, usually swear. I mean, sometimes it can escalate to physical contact. I shout, swear, use foul language. It escalates to physical contact." (Ö2)

"Usually, I shout, I cry. I show loud behavior, sometimes I shout, but I don't resort to violence." (Ö14)

"I think about hurting myself." (Ö6)

"I never tell myself to calm down at that time. I get angry about something by myself. For example, breaking or smashing something in the room calms me down more." (Ö7)

"I harm myself more. I don't physically harm the person in front of me." (Ö11)

"People in the area usually try to calm their anger by using foul language, I am sorry for the vulgarity, swearing, shouting, sometimes using foul words, things like that." (Ö1)

### **Sub-theme 2: Damaging Objects and the Environment**

Adolescents reported behaviors such as breaking objects, smashing things, and breaking doors or windows as an expression of their anger.

Some expressions from adolescent individuals:

"I break doors and windows, but I don't harm a person." (Ö8)

"When I am very affected, I get the feeling of breaking or smashing things around me, it happens." (Ö10)

"Or when I argue with my friends, I can't stand, I also damage my belongings. I damage my belongings, I damage the walls. After damaging my things, I have a crisis and it's over." (Ö11)

## **Theme 3: Emotional Reactions and Social Effects After Anger**

### **Sub-theme 1: Feelings Experienced After Anger**

Adolescents usually experience feelings such as regret, sadness, guilt, relaxation, self-reflection, and learning a lesson after anger.

Some expressions from adolescent individuals:

"Then I generally feel a sense of regret." (Ö2)

"After the anger passes, I regret what I did." (Ö4)

"My reactions after anger are sadness. For example, after a fight at home, I go outside and don't talk to anyone for 1-2 days." (Ö8)

"After the exam, I felt a mixed feeling of sadness and anger. I had a release of anger and cried." (Ö14)

"Why did I do that, I should not have done it, I could have reacted normally. I like to learn a lesson." (Ö9)

"After shouting, I feel a little relieved, but later, after thinking about it, I feel a bit guilty." (Ö15)

"I sit somewhere alone, I stay by myself until I calm down. For example, I listen to music, I stay alone." (Ö1)

"Then I think to myself, I won't do such a thing again, and I calm myself down." (Ö9)

### **Sub-theme 2: Effects on Social Relationships**

Adolescents reported effects on social relationships, which may manifest as disruption in family relationships and deterioration in social relations.

Some expressions from adolescent individuals:

"I mean, if I had an argument with my family, my relationship with them gets worse." (Ö13)

"Sometimes it negatively affects me, especially in the arguments with my family." (Ö14)

"Yes, it affects my close circle of friends because sometimes, whether I like it or not, a friend makes a joke, and if I don't like it, I get angry suddenly." (Ö1)

## **Theme 4: Anger Management and Coping Strategies**

### **Sub-theme 1: Calming Methods**

Adolescents use methods such as listening to music, engaging in physical activities (e.g., walking), and smoking to calm down.

Some expressions from adolescent individuals:

"When I get angry, I usually smoke. I listen to music, I also go for a walk." (Ö2)

"When there's music and cigarettes, I automatically calm down. When I smoke, I calm down. I usually listen to music." (Ö3)

"I smoke, go to a quiet place. I go outside, wherever it is, and go to a quiet place." (Ö8)

"Usually, I smoke a cigarette to control myself or I prefer to be alone." (Ö10)

"I listen to music, I also go for a walk. That's how I calm down." (Ö2)

"Usually, I listen to music. When I have music and cigarettes, I automatically calm down, I understand." (Ö3)

### **Sub-theme 2: Self-Regulation and Control Mechanisms**

Adolescents use strategies such as self-control, thinking and evaluating, self-talk to develop self-awareness, and changing the environment to distance themselves from the situation.

Some expressions from adolescent individuals:

"Before I get angry, I actually plan it in my mind, I draw it from top to bottom." (Ö9)

"There, after changing the environment, I cry a little, then think. I mean, you cry, then you think." (Ö15)

"I say to myself, I am glad I didn't do that physical violence." (Ö1)

"I move away from the environment. When I get angry, I smoke; this calms me down a little." (Ö12)

"If the person in front of me continues to react, I react back, but if they don't react, stay silent, I just leave the place." (Ö3)

"I shout and leave the environment. I generally move to a different environment. There, after changing the environment, I cry a little, then think." (Ö15)

"Usually, I smoke a cigarette or prefer to be alone to control myself. My reactions, I think to myself, 'How did I do that?' Sometimes I find myself right, I say 'I am glad I did it.'" (Ö10)

"I mean, I like being alone, I go somewhere, I stay alone, and talk to myself. In my mind, I wonder if I am right or wrong?" (Ö9)

"Then, after a fight at home, I went outside, came back, didn't talk to anyone for 1-2 days. Then it gets better on its own." (Ö8)

### **Sub-theme 3: Communication and Emotional Expression**

Adolescents use strategies such as expressing their feelings openly and apologizing for communication and emotional expression.

Some expressions from adolescent individuals:

"Afterwards, I think about what I did, and then I usually realize I was wrong, and go apologize." (Ö7)

*"If I can convey my feelings to the other person, I feel happy and they understand."* (Ö12)

## Discussion

This study investigated anger and anger expression in adolescents. As a result of the interviews, four themes related to the experience of anger and anger expression in adolescents were identified (causes of anger, anger expression, emotional reactions and social effects after anger, anger management and coping strategies).

It is reported that genetic and environmental factors, perceiving events as self-directed, low tolerance to frustration, things not going as expected, anxiety, physical and emotional problems, substance use, and having a bad day can be effective in adolescents experiencing anger (Yadav et al., 2017). In our study, it was determined that adolescents become angry due to personal reasons such as daily life confusion, responsibilities, feelings of failure, stress load, and mental and physical fatigue. Stress is shown as one of the most important causes of anger in adolescents (Björling & Singh, 2017). Adolescence is one of the critical periods of physical, mental, and psychosocial change (Akbaş & Yiğitoğlu, 2022; Lowth, 2015). Therefore, adolescents are believed to experience stress and fatigue due to their efforts in self-discovery and self-identity and that facing increased responsibilities leads to anger. On the other hand, adolescents stated that they become angry due to social and environmental reasons such as injustice, lying, things going wrong, disagreements about sharing responsibilities, angry reactions from people around them, social habits, and damage to personal belongings. Existing studies emphasize the importance of social causes in forming anger (Björling & Singh, 2017; Oolup, Brown, Nowicki, & Aziz, 2016). Social environment plays an important role in the personality development of adolescents. In our study, some adolescents talked about the behaviors of angry individuals around them. This may be a result of adolescents learning anger from their environment. According to social learning

theory, individuals learn anger and violent behaviors by observing them in their social environment. Especially children and adolescents are influenced by their parents' behaviors (Akbaş & Yiğitoğlu, 2022; Bandura, 2024). In our study, the fact that adolescents' reasons for anger are mostly based on social factors may indicate their sensitivity to environmental influences. Additionally, adolescents stated that anger in their region is often expressed through violence, fights, and negative words. Our findings show that adolescents express their anger by shouting, cursing, crying, considering physical violence, self-harming, or damaging objects (e.g., breaking doors and windows). This situation is thought to reflect the sociocultural characteristics of the region. Therefore, it is important to examine anger within a cultural context.

In our study, it was determined that adolescents expressed their anger by yelling, swearing, crying, considering physical violence, harming themselves, breaking things, and breaking doors and windows. There are various factors that influence how and when children express their anger. Anger expression can be affected by parental responses, parental attitudes, parents' coping strategies, mistreatment, punishment, personality traits, age, and gender (Kerr & Schneider, 2008). Younger children tend to externalize their anger more. As age increases, the expression of anger becomes less acceptable to the environment. On the other hand, it is reported that girls tend to be less angry or control their anger more (Kerr & Schneider, 2008). In the study by Björling and Singh, adolescents described anger not as a passive internal emotion but as an emotion that can result in aggressive behaviors directed toward themselves or their surroundings. (Björling & Singh, 2017). In another study, it was found that almost all adolescents experienced the feeling of anger, 7.1% of participants punched other people when they became angry, 25.1% damaged objects, 27.8% became verbally aggressive or swore, more than 50% expressed regret for expressing anger, and 44.7% wanted to apologize (Nasir & Abd Ghani, 2014). Similarly, in our study, some adolescents stated that they experienced feelings of



regret, sadness, guilt, calmness, self-questioning, and learning lessons after anger.

The excessive and uncontrolled expression of anger by adolescents can affect their physical and mental health (Yadav et al., 2017) and cause problems in their social relationships (Nasir & Abd Ghani, 2014). In our study, adolescents stated that they experienced deterioration in family and social relationships due to their reactions after anger. Therefore, to protect physical and psychosocial health, it is important to express anger appropriately and use healthy coping strategies.

In our study, adolescents stated that they used methods such as listening to music, physical activity, and smoking to cope with anger. These practices help adolescents relax by redirecting their attention. On the other hand, adolescents reported using self-regulation and control mechanisms such as self-control, reflecting on the event, talking to themselves, and changing the environment to cope with anger. Adolescents also mentioned trying to cope with anger by openly expressing their feelings and apologizing. In different studies, adolescents have been observed to use methods such as avoidance, distancing (Björling & Singh, 2017; Nasir & Abd Ghani, 2014), deep breathing, trying to stay calm, trying to understand the event (Nasir & Abd Ghani, 2014), harming themselves and others (Anjanappa et al., 2020b), watching television, going out, and playing with friends (Anjanappa et al., 2020b) as distracting activities.

Nurses are an important professional group providing physical and psychosocial care for adolescents in schools (Adana & Arslantaş, 2011). It is notable that a number of studies on anger expression and coping with anger in adolescents have been conducted by nurses (Adana & Arslantaş, 2011; Doğan & Çam, 2020; Lök, Bademli, & Canbaz, 2018). Since one-on-one interviews with adolescents were conducted in this study, the data obtained can provide current information for nurses in creating care plans. The results of the study can guide the planning of coping training for adolescents.

## Conclusion

The findings of the study show that anger is an important issue among adolescents. The expression of anger in adolescents can have destructive effects, such as harm to oneself and others, and social relationships may be affected after anger. This situation can lead to the deterioration of adolescents' physical and psychosocial health, as well as lay the foundation for societal consequences due to the emergence of individuals without anger control. Therefore, anger management in adolescents is a multifaceted issue that needs to be addressed by family members, teachers, and health professionals. Anger expression and coping are learned in the family. At this point, it is important to evaluate both the adolescent and the family together. In order to prevent the negative outcomes of anger, it is suggested that nurses take an active role in schools to identify adolescents exhibiting aggressive behaviors, organize anger coping training in schools, cover stress and anger management topics in school curricula, encourage adolescents to adopt hobbies to express their anger appropriately, guide them to form positive friendships and raise societal awareness about anger expression.

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## Conflict of interest

The Author(s) declare(s) that there is no conflict of interest.

## Authors' Contributions

All listed authors meet the authorship criteria and are in agreement with the content of the manuscript. Study design: HS, ZKŞ. Data collection: HS. Data analysis: HS, ZKŞ. Study supervision: HS, ZKŞ. Manuscript writing: HS, ZKŞ. Critical revisions for important intellectual content: HS, ZKŞ.

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## Limitations

The data of this research are limited to the statements of the adolescents who participated in the study, and the results cannot be generalized.

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