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### **Technology-Assisted Anger Management Interventions for Adolescents Florence Omumu**

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#### **ABSTRACT**

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This paper offers a thorough examination of the present condition and prospective advancements in technology-based anger management therapies for teenagers with aims to accomplish two objectives: firstly, to assess the efficacy of technology-assisted anger management programmes, and secondly, to examine the wider implications and obstacles associated with using technology into interventions for adolescent mental health. The paper examines both traditional and technology-assisted interventions and highlights the good results they yield, including better anger management, more emotional intelligence, and greater coping mechanisms that are linked to technology-driven approaches. The literature study examines conventional psychotherapy and compares it to emerging technology-based approaches, particularly mobile applications, and virtual reality programmes. The discourse assesses the effectiveness, user contentment, and lasting effects of technology-assisted interventions by analysing past research, offering valuable insights into the possibilities of these interventions. The effectiveness section provides a comprehensive analysis of favourable results, with a particular focus on the disadvantages of depending on technology and ethical concerns within the digital environment. The practical implications underscore the incorporation of technology into programmes addressing the mental health of adolescents, the necessity of training mental health practitioners in the use of technology, and the need to consider varied populations, particularly in Nigeria. Future directions entail the need to fill up gaps in research, investigate future technologies, and comprehend the lasting impacts of these treatments.

#### 1.0 INTRODUCTION

Adolescence is a challenging stage of development marked by the abrupt transition from childhood to adulthood. Teenagers' ability to control and regulate their anger is a significant issue that is gaining more and more attention. Adolescence is characterized by a variety of biological, psychological, and social changes that frequently result in heightened emotional instability; therefore, the greater focus is warranted [1]. Teens are more likely to feel strong emotions, especially rage, because of the intricate relationship between hormonal shifts, cognitive growth, and the drive for autonomy [2]. The ongoing neurological and hormonal changes in the adolescent brain that impact impulse control and emotion regulation can be the cause of the increased emotional reactivity. Teenagers may therefore experience anger management issues that are distinctly different from those experienced by adults or children [3]. Adolescent anger management is particularly difficult due to a combination of external factors and the intrinsic challenges of the developmental stage [4]. The wide range of complex emotional experiences is further

compounded by the pervasiveness of social media, peer pressure, academic expectations, and familial concerns. Teens may find it difficult to communicate and manage their anger as they attempt to make their way through the complicated web of influences in their lives. Their relationships with others and mental health may suffer because of this [5]. Furthermore, unchecked teenage rage has negative effects on society in addition to the individual. Increased antagonism, difficulties in school, strained family ties, and a higher risk of mental health issues are some potential outcomes [6]. Recognizing the far-reaching effects of this problem, specialists, professionals, and policymakers have moved to address the pressing need for anger management programs that are tailored to the unique challenges that arise throughout adolescence [7].

There has been a discernible shift in the way we see and handle mental health issues because of the increased public awareness of these issues. Intervention and offering support proactively rather than stigmatizing them is now the trend. [8]. As a result, researching anger management techniques for teenagers who use technology is an

important and modern area of research. The aim of the discourse also is to discuss and review studies on the potential benefits of adolescent psychology and technological innovation in enhancing the mental health of teenagers. The effectiveness of these interventions will be assessed, think about the real-world ramifications, and investigate potential opportunities to further integrate technology into the intricate field of adolescent mental health. This discourse intends to analyze and assess the state of the art to obtain a thorough understanding of how technology might assist in addressing the challenges associated with teenage anger management. It will also to focus on the broader implications and challenges of using technology in adolescent mental health therapy. While there is no denying the potential advantages of technological innovation, it is important to consider the difficulties that come with combining mental health support with digital platforms. This inquiry considers moral issues, potential drawbacks, and the need for a well-rounded approach that puts adolescent wellness first. Additionally, the study aims to discuss the practical implications for educators, legislators, and mental health experts who play critical roles in implementing and overseeing technology-assisted therapy for teenagers. As such, issues like digital equity, privacy concerns, and the potential for technology to inadvertently exacerbate existing disparities in mental health facility access will all be covered in this article. These challenges will be addressed and practical insights will be offered that will aid in the development of acceptable and effective methods for using technology into treatments for teenage mental health. This article will help to inform evidencebased practices and ethical dilemmas while also evaluating technology's effectiveness and looking at its consequences and issues in relation to adolescent mental health.

# 2.0 THE ROLE OF TECHNOLOGY IN MANAGING MENTAL HEALTH ISSUES AMONG TEENAGERS

With new choices for support and intervention, technology has emerged as a potent and revolutionary force in the rapidly evolving field of adolescent mental health. Technology plays a multifaceted role in helping teens who are struggling with mental health issues by providing a range of innovative solutions that go beyond the usual barriers to care, stigma, and accessibility [9]. Technology serves primarily as a conduit for the dissemination and advertising of information. Because to the increasing usage of cellphones and internet connectivity, adolescents now have unparalleled access mental health resources, information, psychoeducational materials [10]. Teenagers now have access to a wealth of information on mental health concerns, coping mechanisms, and expert guidance through online resources, interactive websites, and mobile applications, this knowledge was previously only available in clinical settings [11]. The advent of telehealth and virtual counselling is a revolutionary development in removing geographic barriers and

enhancing the availability of mental health services. Teens can now communicate with mental health professionals using text-based platforms, video chats, or app-driven interfaces, regardless of where they live [12]. This not only helps with scheduling and transportation issues, but it also fosters a sense of independence and alone that many kids need while they work with the complexities of their mental health [13].

Technology has also made it possible to develop innovative treatment strategies that are tailored to the unique needs of teenagers. With smartphone apps designed especially for mindfulness, mood monitoring, and cognitive behavioural therapy, adolescents can take an active role in their mental health journey [14]. Programmes that use virtual reality to simulate stress management scenarios or provide a safe setting for exposure therapy offer immersive therapeutic experiences. As traditional treatment techniques are enhanced, these technological interventions produce more dynamic, engaging, and individually tailored mental health care [15]. Social media platforms, which are often deemed detrimental to mental health, can also offer opportunities for positive intervention. Online forums and support groups give teenagers virtual spaces where they can share their experiences, look for advice, and find solace in the support of others going through similar struggles [11]. Peer support facilitated by technology can greatly reduce the sense of loneliness that many teenagers dealing with mental health issues experience [16].

Nevertheless, there are some challenges associated with technology's influence on teenagers' mental health. Ethical issues, privacy concerns, and the need for strict regulation highlight the importance of effective technology integration. Legislators, IT entrepreneurs, and mental health specialists must work together to develop a comprehensive plan that strikes a balance between protecting youth welfare and utilizing technology's benefits [17].

### 2.1 Conventional Anger Management Techniques for Teenagers

Psychotherapy is the use of psychological concepts and procedures in the treatment of mental illnesses and emotional issues [18]. A significant component of the body of existing work is the analysis of traditional anger management programmes for adolescents, with a particular emphasis on psychotherapy. One essential technique that has been very helpful in treating teenage anger management problems is psychotherapy [19]. It offers insightful knowledge on how to control emotions, alter thought processes, and improve interpersonal skills. The literature review that follows provides an in-depth overview of current knowledge about psychotherapy as a traditional strategy for teen anger management [19,20].

The early literature covers the historical development of psychotherapy in relation to the treatment of teenage aggression. Psychodynamic approaches, which are based on Freudian principles, primarily focused on the role of unconscious conflicts in the appearance of wrath [19]. Cognitive-behavioral theories, such Aaron Beck's

Cognitive Therapy and Albert Ellis's Rational Emotive Behavior Therapy (REBT) gained popularity and traction throughout time. These ideas underpin many contemporary therapeutic techniques for dealing with teenage anger, emphasizing the relationship between ideas, feelings, and behaviors [21].

Numerous empirical studies have investigated how well psychotherapy works for teens who struggle with anger management {19, 20, 21} A meta-analysis of numerous studies' data was done and established the overall positive impact of psychotherapy in lowering anger and improving emotional regulation {3,19, 20, 21}. It has been demonstrated that cognitive-behavioral therapy is effective in changing negative thought patterns and behaviours associated with anger [3]. An additional investigation was carried out regarding the adjustment of psychotherapy techniques to diverse cultural settings. They emphasized the need for culturally competent techniques to ensure that interventions are effective across various sociocultural and ethnic groups [21].

While psychotherapy is widely acknowledged as a crucial component in the management of teenage anger, extant literature acknowledges its limitations and challenges [22]. Researchers have investigated concerns related to the durability of intervention effects, the involvement and continuation of teenagers in therapy, and the possible negative perception around requesting mental health assistance [16]. The integration of psychotherapy with novel and evolving approaches is explored in the literature. A study looks at how technology-assisted interventions and psychotherapy work together [23]. Despite its historical roots, psychotherapy is always evolving because of the integration of concepts from various theoretical frameworks and adaptations to the technological and demands cultural of contemporary society. Understanding the effectiveness, cultural quirks, limitations, and integration opportunities psychotherapy expands comprehensive our comprehension of its role in addressing adolescent anger. As the area develops, continued investigation and learning will deepen our understanding and direct the development of more accurate and effective treatments.

#### 3.0 TECHNOLOGICAL INTERVENTIONS

Numerous techniques have been introduced in the developing field of technology-assisted therapy for teenage anger management; among the most noteworthy of them are mobile applications and virtual reality programs [24]. Numerous studies have investigated how well smartphone apps work to calm teenagers down when they are angry. Also to find out if there are positive outcomes, such as reduced anger, improved emotional control, and increased coping skills. Furthermore, a great focus has been placed on user satisfaction, with user-friendly, and easily compelling, applications showing better rates of adherence among teenagers [25]. Some programmes make use of cognitivebehavioural techniques, such as providing prompts for tracking emotions and using coping mechanisms. Other

applications, however, combine mindfulness and relaxation techniques [9]. Teenagers' adaptability is increased by the variety of possibilities offered by mobile applications for anger management interventions, which cater to their different expectations and preferences. Despite their benefits, mobile applications come with drawbacks, including worries about data security, the possibility of becoming overly reliant on technology, and the need for frequent updates to stay up to date with advances in evidence-based procedures [26].

#### 3.1 Virtual Reality Programmes

Adolescent anger management therapies can benefit from the creative use of virtual reality (VR) programmes, which immersive therapeutic experiences. programmes give teenagers a safe environment in which to practice controlling their anger through engaging and realistic activities that simulate real-life situations [15]. Virtual reality (VR) has been shown to have the potential to enhance emotional awareness and improved behavioural regulation. The use of virtual reality programmes in exposure therapy has shown great promise in helping teenagers face and manage their anger triggers in a safe and encouraging environment. One of the advantages of virtual reality (VR) exposure therapy is that it helps in reducing symptoms associated with rage and improving emotional health in general [27]. Virtual reality programmes provide certain technological challenges, such as the need for specialised equipment and the potential for pain during intense sessions. Numerous studies have looked at how well technology-based interventions work to reduce teenage fury. The findings show that teens who took part in technology-assisted programmes showed a statistically significant reduction in symptoms of fury. Through cognitive-behavioral therapy, mobile applications and virtual reality platforms have demonstrated efficacy in altering detrimental thought patterns and enhancing emotional regulation [28]. According to research [28], personalized programmes that account for each person's unique characteristics and preferences typically yield superior outcomes. Teenagers' traditional techniques of anger control could be improved by the efficacy of technology-assisted therapy, as evidenced by reductions in the frequency and severity of wrath [28]. User satisfaction is critical to the long-term effectiveness and sustainability of technology-assisted anger management therapy. An investigation was conducted about the mobile application experience of teenagers and they discovered that enhanced adherence and engagement are strongly correlated with high levels of satisfaction [29]. Many times, the interactive and userfriendly design of these programs is attributed to their positive user experiences since it gives teenagers a sense of empowerment and autonomy [29].

An examination of the long-term effects provides a thorough understanding of the durability and long-term impact of technology-assisted anger management techniques. A longitudinal investigation was carried out by a researcher who kept long-term records of participants and it was found that teens who took part in these

programmes saw long-lasting improvements in their emotional regulation, problem-solving skills, and overall emotional health [30]. However, the study acknowledges the challenges that come with maintaining long-term engagement and commitment [30]. Numerous studies highlight the importance of frequent treatments or booster sessions to reinforce acquired skills and prevent relapse. The evidence suggests that long-term outcomes can be improved by implementing a complete plan that combines technology-assisted therapy with conventional techniques or routine check-ins [31]. The positive outcomes in these domains underscore technology's potential to play a pivotal role in managing adolescent fury, with implications for both short-term symptom relief and long-term improvements in emotional health [22]. Ongoing study in the field will improve our understanding and direct the development of more accurate and effective treatments.

# 4.0 EFFICIENCY OF TECHNOLOGY-FACILITATED ANGER MANAGEMENT INTERVENTIONS.

The significant improvement in anger regulation shown receiving technology-supported management therapy is a notable and enduring advantage. Numerous studies [29,30,31] demonstrated that teens who engage in these therapies are better able to identify and regulate their angry reactions. Teens can identify triggers and learn suitable calming techniques by using smartphone applications with interactive exercises and real-time tracking features [32]. Programmes for virtual reality provide immersive settings that produce a safe environment for exercising self-control strategies. This develops a tangible development in youngsters' ability to moderate their emotional responses.

The efficacy of technology-based interventions in enhancing anger management is further emphasised by the integration of evidence-based therapeutic techniques, such as cognitive-behavioral procedures [33]. Correcting flawed cognitive processes and encouraging adaptive reflexes, these therapies seek to assist youngsters in gaining the practical skills necessary to effectively regulate anger in a variety of circumstances, including both virtual simulations and real-world events. The total efficacy of technology-based interventions in enhancing teenagers' emotional well-being is significantly influenced by the tangible shift towards better anger regulation.

Research indicates that adolescents who engage in technology-based anger management programmes have a higher emotional awareness. Mobile apps often include features that prompt users to reflect on their emotional states, encouraging a more conscious understanding of the things that make them angry and the feelings that follow. Adolescents who participate in interactive exercises and make use of self-monitoring functionalities develop a more comprehensive understanding of the intricate relationship between their emotions and actions [34]. Programmes that use virtual reality to create

immersive, emotionally charged environments help to achieve this goal. Adolescents learn important things about their emotional reactions by navigating and reacting to these situations in a controlled setting. Teens can make more informed and thoughtful decisions by using technology-driven treatments to help them get a deeper knowledge of their emotions. This gives individuals the ability to control their rage in a proactive, self-aware manner [35]. Teenagers can simply utilize mobile applications' interactive modules and in-the-moment coping mechanisms during periods of extreme stress or wrath. Adolescents are taught adaptive coping methods through these programmes, which often include psychoeducational content. These strategies transcend beyond the digital interface [36]. Through immersive and dynamic virtual reality experiences, virtual reality programs give teenagers the opportunity to hone their coping skills. Through this experiential education, teens' practical and adaptive abilities are strengthened, enabling them to better handle situations that make them angry in their daily lives [37]. These therapies' emphasis on improving skill development aligns with the larger goal of giving adolescents enduring tools for long-term emotional wellness, rather than just treating anger in the moment.

#### 4.1 Obstacles and Restrictions of Technology-Enhanced Anger Management Interventions.

Even though technology-enabled anger management programmes have been associated with favorable outcomes, a major barrier is that some groups cannot easily access them. Socioeconomic factors, such as unequal access to smartphones, tablets, and stable internet connectivity, might present challenges for adolescents from lower-income homes [38]. Even though technologyenabled anger management programmes have been associated with favourable outcomes, a major barrier is that some groups cannot easily access them. Socioeconomic factors, such as unequal access to smartphones, tablets, and stable internet connectivity, might present challenges for adolescents from lowerincome homes [39]. In addition, one aspect of guaranteeing accessibility is the incorporation of cultural and linguistic diversity. The efficacy of technologyassisted therapies for different populations may be limited due to cultural sensitivity and lack of multilingual availability in their design and content [23]. To ensure that technology-based therapies for anger management are accessible and effective, it is imperative that these accessibility barriers are recognized and addressed.

Technology dependence comes with a built-in difficulty and possible drawbacks that need to be carefully considered. Teens' inadvertent reliance on virtual reality apps or smartphone applications may exacerbate their dependence on screens for emotional management. Because of this dependence on digital technology, there are worries that real interpersonal skills and in-person interactions may be neglected [40]. When using technology for intervention, researchers and practitioners need to exercise caution and avoid becoming overly dependent on it. Maintaining a healthy balance between

the virtual and real-world parts of adolescents' life is crucial. Furthermore, given how quickly technology is developing, some interventions may become antiquated or incompatible with tools and platforms used today. This makes it challenging to guarantee that medicines will remain significant and effective over time [41]. To ensure that therapies remain relevant and beneficial to the intended adolescent demographic, it is imperative that research and adjustments be made on a continuous basis to align them with evolving technological settings. The ethical ramifications of integrating technology into mental health interventions must be carefully considered. Data security, informed consent, and privacy issues are of the utmost significance in the digital world. When teenagers engage in technology-assisted treatments, it is imperative to put their privacy first because they can divulge private information [42]. Establishing and upholding ethical standards in the provision of mental health services is contingent upon this. Establishing clear guidelines and moral standards that govern the development and application of these treatments is also essential and to minimize any harm and safeguard the wellbeing of minors, technology makers must be held accountable for adhering to established ethical standards [43]. To encourage informed decision-making and ethical engagement with new technologies, it is essential to provide transparent and unambiguous information about the use of data, potential risks, and the intended scope of the interventions.

#### **4.2 Practical Implications**

The field of technology-based anger management techniques is evolving, and this has significant ramifications for mental health treatment, particularly about meeting the unique needs of adolescents. Adolescent mental health programs that use technology have the potential to be adaptable and user-friendly means of delivering targeted therapies. Current mental health frameworks can be enhanced by incorporating evidence-based mobile applications and virtual reality programmes, which can expand the reach and effectiveness of interventions. To guarantee that treatments follow clinical best practices while utilizing the interactive and engaging features that technology offers, practitioners should look to collaborate with technology developers. The seamless integration of technology into mental health programs allows for a more thorough and scalable approach, providing them with flexible tools that supplement conventional treatment modalities. Moreover, mental practitioners must actively engage in technological advancements and make sure they are knowledgeable about creating platforms and apps. Regular assessments of the suitability and efficacy of technology-based interventions ensure that they adapt to the rapidly evolving field of adolescent mental health. Incorporating these modifications, mental health programmes are more effective overall since they are proactive in responding to the changing preferences and communication styles of youth.

Also giving priority to mental health practitioners' training is essential for incorporating technology-assisted therapies into adolescent mental health programmes in an effective manner. Professionals should be equipped with the skills needed to use technology appropriately through training programmes, so they can easily integrate these tools into their therapeutic practices. It is intended that workshops, online training modules, and continuing education programmes be created to introduce mental health practitioners to evidence-based technological interventions. This course will enable professionals to apply their clinical knowledge in the digital domain by covering the process of selecting, implementing, and programmes. technology-based supervising preservation of therapeutic boundaries, data security, and ethical issues in the context of technology-driven therapies can all be covered in specialized training.

Furthermore, it is critical to foster a culture of ongoing education and adaptability in the mental health field. It is imperative to encourage professionals to stay up to date on technology innovations and to continuously improve their abilities to meet the evolving needs of the adolescent demographic. It is important to allocate funds for educational initiatives, so that mental health practitioners can make optimal use of technology to raise the standard and accessibility of their services.

It is imperative that accessibility and cultural relevance be given priority when introducing technology-assisted treatments in Nigeria and other diverse societies. To ensure inclusivity and efficacy, interventions must be tailored to cultural norms, language diversity, and socioeconomic conditions. It is imperative that practitioners collaborate with educators, policymakers, and local communities to fully appreciate the unique challenges and opportunities found in the Nigerian context. Adopting this collaborative approach can help develop technological interventions that are sensitive to cultural differences and align with the diverse experiences of teenagers in Nigeria.

Nigeria's digital divide must be closed, and creative solutions like government support for increased technical accessibility, partnerships with local organizations, and community-driven projects are needed. Mobile apps that are universally compatible and save a lot of data can assist get over limitations with internet access and device availability.

To serve a larger spectrum of individuals, practitioners should also ensure that technology-based treatments are available in many languages, considering the linguistic diversity seen in Nigeria. Teenagers in Nigeria have cultural preferences, therefore materials and images that are specifically tailored to them might increase their participation and the treatment's overall effectiveness.

## 5.0 AREAS OF RESEARCH THAT HAVE NOT BEEN EXPLORED YET AND SHOULD BE FURTHER INVESTIGATED

There are several research gaps and areas that could use more investigation as teen anger management therapies utilizing technology advance. Analysing these differences is crucial to advancing the field and improving approaches to better meet the needs of adolescents. Important areas for more research include:

- 1. A thorough investigation on the cultural adaptation of technology-assisted anger management therapy is needed. These therapies will become more relevant globally if their adaptation to different cultural contexts—especially non-Western ones—is examined. This is because most of the past studies were Western based.
- 2. Investigation of the efficacy of technology-assisted therapy in additional demographic groups, including age, gender, and socioeconomic status. Understanding the ways in which these therapies resonate with different teen cohorts can be quite helpful in developing targeted and customized methods.
- 3. Synergistic effects and efficacy of combining multiple technology modalities, such as mobile applications and virtual reality programs, is referred to as the combination of modalities. Most of this field's study is still uncharted. Examining the possible synergistic or additional impacts of integrating these medicines could produce crucial information.
- 4. Investigation on how parents might be included, keeping in mind the familial context of adolescent mental health.
- 5. The financial implications and cost-effectiveness of implementing technology-assisted therapies on a larger scale. Acquiring a thorough grasp of the financial implications will provide decision-makers in government and the medical community with important information about the possibility of these therapies being continued and expanded in the future.

#### **6.0 CONCLUSION**

This discourse focused on teens' use of technology-based anger management programmes and it provided significant new information about the advantages, challenges, and effects of integrating technology into the provision of mental health services. The process of synthesizing the literature has revealed that these therapies offer several positive benefits, including improved emotional understanding, improved control over anger, and increased capacity to handle difficulties. Virtual reality programmes and mobile applications have demonstrated potential as useful tools for encouraging positive changes in teenagers' mental health. The review emphasized how important it is to consider the benefits and drawbacks of technology-assisted therapies. The encouraging outcomes were somewhat offset by barriers such limited accessibility for groups, possible drawbacks associated with reliance on technology, and moral questions about the use of technology in mental health treatments. The integration of technology in programmes pertaining to the mental health of adolescents and the need to educate mental health professionals on how to use technology effectively were acknowledged as critical

practical consequences.

#### **6.1 Recommendations**

Based on the discourse of this paper, the following recommendations are made:

- Studies on cultural adaptability, efficacy across demographic variables, and the integration of diverse technological modalities should be conducted by researchers to fill up research gaps. This includes focusing on the effectiveness and cost implications as well as the long-term effects and preventing recurrence.
- The creation and implementation of training programmes that enable mental health practitioners to use technology successfully should be prioritised. Programmes for skill development and continuing education will give professionals the ability to safely integrate technology into their therapeutic practices.
- Prioritizing inclusiveness and equitable access is important, especially in situations with limited resources and varied communities. Treatments must be tailored to be linguistically and culturally diverse, paying special emphasis to removing barriers to accessibility in places like Nigeria.
- Researchers and practitioners should investigate developing technologies such as artificial intelligence, wearable gadgets, augmented reality, and neurofeedback to evaluate how they may affect anger management programmes for teenagers. This exploration will provide valuable insights for the creation of cutting-edge and flexible solutions.
- Ethical Considerations: Additional research is necessary to examine the moral ramifications of using technology in mental health therapies. Ensuring data security, protecting privacy, and adhering to ethical principles are critical considerations in the development and execution of interventions.

#### **REFERENCES**

- [1] M. Fitzgerald (2021), Developmental Pathways from Childhood Maltreatment to Young Adult Romantic Relationship Functioning. Journal of Trauma & Dissociation, 22(5), 581–597. <a href="https://doi.org/10.1080/15299732.2020.1869653">https://doi.org/10.1080/15299732.2020.1869653</a>
- [2] T. Léger-Goodes, C. Malboeuf-Hurtubise, T. Mastine, M. Généreux, P.-O. Paradis, and C. Camden (2022), Eco-anxiety in children: A scoping review of the mental health impacts of the awareness of climate change. Frontiers in Psychology, 13. https://doi.org/10.3389/fpsyg.2022.872544
- [3] F. K. Cheng (2016), Is meditation conducive to mental well-being for adolescents? An integrative review for mental health nursing. International Journal of Africa Nursing Sciences, 4, 7–19. <a href="https://doi.org/10.1016/j.ijans.2016.01.001">https://doi.org/10.1016/j.ijans.2016.01.001</a>
- [4] I. M. Shochet, J. A. Orr, W. Cockshaw, T. D. Tran, N. La, H. Q. Nguyen, N. Nguyen, A. Wurfl, H. T. Nguyen, R. Stocker and J. Fisher (2022), Validation of the Behavioral Anger Response Questionnaire for Children (BARQ-C) in a large community sample of

- Vietnamese middle adolescents in Hanoi. BMC Psychology, 10(1). https://doi.org/10.1186/s40359-022-00907-4
- L. Foulkes and S. J. Blakemore (2021), Individual [5] differences in adolescent mental health during COVID-19: The importance of peer relationship quality. Neuron, 109(20), 3203-3205. https://doi.org/10.1016/j.neuron.2021.07.027
- [6] L. M. Sippel, N. Mota, L. K. Kachadourian, J. H. Krystal, S. M. Southwick, I. Harpaz-Rotem and R. H. Pietrzak (2016), The burden of hostility in U.S. Veterans: Results from the National Health and Resilience in Veterans Study. Psychiatry Research-Neuroimaging, 243, 421–430. https://doi.org/ 10.1016/j.psychres.2016.06.040
- [7] M. Theberath, D. Bauer, W. Chen, M. Salinas, A. B. Mohabbat, J. Yang, T. Y. Chon, B. A. Bauer and D. L. Wahner-Roedler (2022), Effects of COVID-19 pandemic on mental health of children and adolescents: A systematic review of survey studies. 10, 205031212210867–205031212210867. https:// doi.org/10.1177/20503121221086712
- [8] S. J. Pervan and L. L. Bove (2015), Stigmatized service workers in crisis: mitigating the effects of negative media. Journal of Service Theory and Practice, 25(5), 551–567. <a href="https://doi.org/10.1108/">https://doi.org/10.1108/</a> jstp-04-2014-0068
- [9] I. Burt (2014), Identifying Gender Differences in Male and Female Anger Among an Adolescent Population. The Professional Counselor. https://doi.org/10.15241/ib.4.5.531
- [10] J. Apolinário-Hagen, L. Fritsche, C. Bierhals and C. Salewski (2018), Improving attitudes toward emental health services in the general population via psychoeducational information material: randomized controlled trial. Internet Interventions, 12, 141–149. https://doi.org/10.1016/j.invent.2017.
- [11] R. Shi, K. K. Wang, Z. Xie, R. Zhang and C. Liu (2019), The mediating role of friendship quality in the relationship between anger coping styles and mental health in Chinese adolescents. Journal of Social and Personal Relationships, 36(11–12), 3796-3813.
  - https://doi.org/10.1177/0265407519839146
- [12] G. Barish, H. Aralis, E. B. Elbogen and P. Lester (2019), A Mobile App for Patients and Those Who Care About Them. https://doi.org/10. 1145/3329189.3329248
- [13] N. Weinstein, T. Nguyen and H. Hansen (2021), What Time Alone Offers: Narratives of Solitude from Adolescence to Older Adulthood. Frontiers in Psychology, 12. https://doi.org/10.3389/fpsyg.2021.
- [14] D. G. Sukhodolsky, S. A. Smith, S. A. McCauley, K. Ibrahim and J. Piasecka (2016), Behavioral Interventions for Anger, Irritability, Aggression in Children and Adolescents. Journal of Child and Adolescent Psychopharmacology, 58-64. 26(1),

- https://doi.org/10.1089/cap.2015.0120
- [15] L. Kupczik, W. Farrelly and S. Wilson (2022), Appraising Virtual Technologies' Impact on Older Citizens' Mental Health—A Comparative between 360° Video and Virtual Reality. International Journal of Environmental Research and Public Health, 19(18), 11250-11250. https://doi.org/10.3390/ijerph191811250
- [16] J. Lukoševičiūtė and K. Šmigelskas (2022), Mental Health during COVID-19 Pandemic: Qualitative Perceptions among Lithuanian Adolescents. International Journal of Environmental Research and Public Health, 19(12), 7086–7086. <a href="https://doi.org/">https://doi.org/</a> 10.3390/ijerph19127086
- [17] L. Wang, Y. Wei, Y. Xiao and H. Cai (2023), Relation between young children's anger and fathers' mental health during the COVID-19 epidemic: Moderating role of gender and child number. Child & Family Social Work. https://doi.org/ 10.1111/cfs.13026
- [18] P. Gual-Montolio, I. Jaén, V. Martínez-Borba, D. Castilla and C. Suso-Ribera (2022), Using Artificial Intelligence to Enhance Ongoing Psychological Interventions for Emotional Problems in Real- or Close to Real-Time: A Systematic Review. International Journal of Environmental Research and Public Health, 7737–7737. 19(13), https://doi.org/10.3390/ijerph19137737
- [19] A. Haktanir, D. Aydil, M. Baloğlu and Ş. Kesici (2022), The use of dialectical behavior therapy in adolescent anger management: A systematic review. Clinical Child Psychology and Psychiatry, 135910452211480-135910452211480. https://doi.org/ 10.1177/13591045221148075
- [20] L. Vereenooghe and P. E. Langdon (2013), Psychological therapies for people with intellectual disabilities: A systematic review and meta-analysis. Research in Developmental Disabilities, 34(11), 4085–4102. https://doi.org/10.1016/j.ridd.2013.08.
- [21] D. Edge and H. Lemetyinen (2019), Psychology across cultures: Challenges and opportunities. British Journal of Medical Psychology, 92(2), 261– 276. https://doi.org/10.1111/papt.12229
- [22] M. Shahbazi, F. Ghanbari, A. Jafarinasab, S. Vaziri, S. Foji, Z. Rahimi, F. Hasannezhad and M. Goudarzian (2017), The effectiveness of anger management's training on difficulty of adolescent's emotion regulation. Journal of Fundamental and **Applied** Sciences, 9(1S), 879–879. https://doi.org/10.4314/jfas.v9i1s.739
- [23] M. Jones, S. M. Rice and S. M. Cotton (2019), Incorporating animal-assisted therapy in mental health treatments for adolescents: A systematic review of canine assisted psychotherapy. PLOS ONE, e0210761-e0210761. https://doi.org/ 10.1371/journal.pone.0210761
- [24] N. Sikka, L. Shu, B. Ritchie, R. Amdur and A. Pourmand (2019), Virtual Reality-Assisted Pain, Anxiety, and Anger Management in the Emergency

- Department. Telemedicine Journal and E-Health, 25(12), 1207–1215. <a href="https://doi.org/10.1089/tmj.2018.0273">https://doi.org/10.1089/tmj.2018.0273</a>
- [25] B. B. Asgeirsdottir and I. D. Sigfusdottir (2015), Gender differences in co-occurrence of depressive and anger symptoms among adolescents in five Nordic countries. Scandinavian Journal of Public Health, 43(2), 183–189. <a href="https://doi.org/10.1177/1403494814561817">https://doi.org/10.1177/1403494814561817</a>
- [26] I. P. Dumont and A. L. Olson (2012), Primary Care, Depression, and Anxiety: Exploring Somatic and Emotional Predictors of Mental Health Status in Adolescents. 25(3), 291–299. https://doi.org/10.3122/jabfm.2012.03.110056
- [27] L. Dellazizzo, S. Potvin, S. Bahig and A. Dumais (2019), Comprehensive review on virtual reality for the treatment of violence: implications for youth with schizophrenia. Npj Schizophrenia, 5(1). https://doi.org/10.1038/s41537-019-0079-7
- [28] P. Ducharme, E. Wharff, J. Kahn, E. Hutchinson and G. Logan (2012), Augmenting Anger Control Therapy with a Videogame Requiring Emotional Control: A Pilot Study on an Inpatient Psychiatric Unit. Adolescent Psychiatry, 2(4), 323–332. https://doi.org/10.2174/2210676611202040323
- [29] R. Kenny, B. Dooley and A. Fitzgerald (2015), Feasibility of "CopeSmart": A Telemental Health App for Adolescents. JMIR Mental Health, 2(3), e22–e22. https://doi.org/10.2196/mental.4370
- [30] F. Z. E. Rhermoul, F. Naeem, D. Kingdon, L. K. Hansen and J. Toufiq (2018), A qualitative study to explore views of patients, carers and mental health professionals' views on depression in Moroccan women. International Journal of Culture and Mental Health, 11(2), 178–193. <a href="https://doi.org/10.1080/17542863.2017.1355397">https://doi.org/10.1080/17542863.2017.1355397</a>
- [31] I. Bicanic, C. de Roos, F. van Wesel, G. Sinnema and E. M. van de Putte (2014), Rape-related symptoms in adolescents: short- and long-term outcome after cognitive behavior group therapy. European Journal of Psychotraumatology, 5(1). https://doi.org/10.3402/ejpt.v5.22969
- [32] R. Nasir and N. A. Ghani (2014), Behavioral and Emotional Effects of Anger Expression and Anger Management among Adolescents. Procedia Social and Behavioral Sciences, 140, 565–569. https://doi.org/10.1016/j.sbspro.2014.04.471
- [33] H. Bui, L. Mackie, P. M. Hoang and T. M. Tran (2018), Exploring the effectiveness of cognitive behavioral therapy for Vietnamese adolescents with anger problems. Kasetsart Journal of Social Sciences. https://doi.org/10.1016/j.kjss.2018.05.013
- [34] A. Forte, M. Orri, M. Brandizzi, C. Iannaco, P. Venturini, D. Liberato, C. Battaglia, I. Nöthen-Garunja, M. A. Vulcan, A. Brusić, L. Quadrana, O. Cox, S. Fabbri, and E. Monducci (2021), "My Life during the Lockdown": Emotional Experiences of European Adolescents during the COVID-19 Crisis. International Journal of Environmental Research and Public Health, 18(14), 7638–7638.

- https://doi.org/10.3390/ijerph18147638
- [35] S. Hartley, M. McArthur, M. Coenen, M. G. Carta, V. Covelli, J. Roszczynska-Michta, T. Pitkänen, J. Bickenbach and A. Cieza (2014), Narratives Reflecting the Lived Experiences of People with Brain Disorders: Common Psychosocial Difficulties and Determinants. PLOS ONE, 9(5), e96890–e96890. https://doi.org/10.1371/journal.pone.0096890
- [36] T. Bosqui, A. Mayya, L. Younes, M. Baker and I. Annan (2020), Disseminating evidence-based research on mental health and coping to adolescents facing adversity in Lebanon: a pilot of a psychoeducational comic book 'Somoud.' Conflict and Health, 14(1). https://doi.org/10.1186/s13031-020-00324-7
- [37] F. Grieger, H. Klapperich and M. Hassenzahl (2021), Trash It, Punch It, Burn It – Using Virtual Reality to Support Coping with Negative Thoughts. https://doi.org/10.1145/3411763.3451738
- [38] M. E. Benalcazar, L. Barona, Á. G. Valdivieso, V. H. Vimos, D. Velastegui and C. J. Santacruz (2021), Educational Impact on Ecuadorian University Students Due to the COVID-19 Context. Education Sciences, 12(1), 17–17. <a href="https://doi.org/10.3390/educsci12010017">https://doi.org/10.3390/educsci12010017</a>
- [39] B. A. Wood, G. Ruskin and G. Sacks (2019), Targeting Children and Their Mothers, Building Allies and Marginalising Opposition: An Analysis of Two Coca-Cola Public Relations Requests for Proposals. International Journal of Environmental Research and Public Health, 17(1), 12–12. https://doi.org/10.3390/ijerph17010012
- [40] L. J. Warren, J. R. P. Ogloff and P. E. Mullen (2013), The Psychological Basis of Threatening Behaviour. Psychiatry, Psychology and Law. <a href="https://doi.org/10.1080/13218719.2012.674716">https://doi.org/10.1080/13218719.2012.674716</a>
- [41] S. Coghlan, K. Leins, S. Sheldrick, M. Cheong, P. Gooding and S. D'Alfonso (2023), To chat or bot to chat: Ethical issues with using chatbots in mental health. *Digital health*, *9*, 20552076231183542.
- [42] L. S. Parker, V. Halter, T. Karliychuk and Q. Grundy (2019), How private is your mental health app data? An empirical study of mental health app privacy policies and practices. International Journal of Law and Psychiatry, 64, 198–204. <a href="https://doi.org/10.1016/j.ijlp.2019.04.002">https://doi.org/10.1016/j.ijlp.2019.04.002</a>
- [43] A. Strode, P. K. Singh, C. Slack and D. Wassenaar (2018), Research ethics committees in a tight spot: Approving consent strategies for child research that are prima facie illegal but are ethical in terms of national guidelines. South African Medical Journal, 108(10), 828–828. <a href="https://doi.org/">https://doi.org/</a> 10.7196/samj.2018.v108i10.13203