

ORIGINAL ARTICLE

EFFECT OF ANGER EXPRESSION ON MENTAL WELLBEING AND EMOTIONAL EXPRESSIVITY OF ORPHANS AND NON-ORPHANS

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Background: Orphan-hood is a stage that includes numerous mental and emotional problems. Lack of control on emotions puts orphans at risk of uneasiness. The aim of this study was to see the relationship between anger expressions on mental wellbeing and emotional expressions of orphans and non-orphans. **Methods:** This was a cross-sectional survey conducted from April to June 2021. Data were collected from the orphan and non-orphan adolescent students aged 13–19 years, studying in different institutes of Haripur, Pakistan. After informed consent, State Trait Anger Expression Inventory (STAXI), Short Warwick Edinburg Well-being Scale (SWEMWBS), and Emotional expressivity questionnaires were self-administered by authors and analysed on SPSS-20. **Result:** Sample size was 200 orphan and non-orphan adolescent students, with equal proportion of males and females. Anger expression was positively linked with emotional expressivity ($r=0.29$, $p<0.001$), and anger expression was negatively linked with mental wellbeing ($r=-0.45$, $p<0.001$). Orphan students scored high on anger expression (27.62 ± 5.4) and emotional expressivity (55.28 ± 5.79) as compare to non-orphans (23.59 ± 5.79 and 53.31 ± 5.99 respectively). **Conclusion:** Anger expression is positively linked with emotional expressivity and negatively linked with mental wellbeing. Girls are shy to express their feelings compared to boys. Boys are more engaged in verbal and physical aggression than girls. Orphan boys show more aggression because they face a lot of adjustment and many other difficulties in institutions.

Keywords: Anger expression, mental wellbeing, emotional expressivity

Pak J Physiol 2022;18(2):62–5

INTRODUCTION

An orphan is a person who does not have a living parent to look after him or her. A youngster who has lost both parents is known as an orphan.^{1,2} Orphan-hood is phase exhibiting multiple psychological and emotional issues.³ Lack of self-dedication and incapacity to take choices placed them prone to anxiety.⁴ Mental health is an important aspect of overall well-being. Health is more than just the absence of disease or weakness; it is a state of total physical, mental, and social wellbeing.⁵ It overall indicates the cognitive, behavioural and emotional well-being. It actually talks about how people contemplate, feel, and perform. People sometimes use the term 'mental health' to mean the absence of a mental disorder.⁶ This concept has the critical effect that mental health is defined as more than the absence of mental diseases or disabilities. The term aggression refers to the range of behaviours that can cause physical and psychological harm to oneself, others, or objects in the environment.^{7,8} Expressions of aggression can be made in a variety of ways, including words, mind, and body. The teenage is the most important stage of human development including the initiation of lifelong processes of physical, behavioural, cognitive and emotional growth and change. During these processes, all teenagers develop attitudes and values that guide the decisions, relationships, and understanding of specific matters. It is believed that a satisfying treatment of

psychosocial well-being allows adolescents to look positively in life and make choices that do not endanger the future. Studies show that boys tend to be more physically aggressive, but verbal aggression is often referred to as relational aggression and is more common in girls.^{9,10} Orphans face many psychosocial challenges, including lack of parental guidance, love for new families, care, lack of acceptance, and other risks in the immediate environment.¹¹ Orphans experience mental distress. Higher levels of anxiety, depression, and anger, as well as associated inactivity caused by depression; hopelessness and suicidal thoughts due to the difficulties faced after the death of the parents.

Maternal death has a poor effect at the psychosocial wellbeing of the adults even when they have crossed the 18 years threshold of orphan-hood. Yearning for moms negatively affects their coping strategies, which brings about isolation, sadness, hopelessness, loss of peace, and worry of an unsure future.¹² Psychosocial Support (PSS) is 'a continuous process that meets the physical, emotional, social, mental and spiritual needs of a child', all of which are essential for meaningful and positive human development. This includes formal and informal services dealing with their psychosocial wellbeing.

Adolescents feel very well supported by adults in their lives and religious communities. Many adolescents do not receive the social support they need from their peers and adults to effectively mitigate the

effects of stress and traumatic events in their lives.¹³ As death of parent is a traumatic event that individual experiences in life and has negative effect on mental health. This study was designed to find out the relationship between anger expressions on mental wellbeing and emotional expressions of orphans and non-orphans.

METHODOLOGY

This cross-sectional study was conducted from April to June 2021 after approval from Ethics Committee of University of Haripur. After informed consent, data were collected from the participants on a specifically designed performa. Purposive sampling technique was applied. The participants comprised of orphan and non-orphan adolescent students, both male and female (n=200), aged 13–19 years. Data was collected from educational institutes of Haripur city, Pakistan. The State Trait Anger Expression Inventory (STAXI) developed by Charles D. Spielberger¹⁴ was used to measure aggression between orphan and non-orphan adolescents. Short Warwick Edinburg Wellbeing Scale (SWEMWBS) by Rogers *et al*¹⁵ was used to measure mental wellbeing and Emotional expressivity questionnaire¹⁶ was used to measure emotional expressivity of orphan and non-orphans adolescents. Scales were selected on the basis of established sound reliability, STAXI (0.73–0.76), SWEMWBS (0.89) and emotional expressivity questionnaire (0.830) in relevant context.

Data were analysed using SPSS-20. Independent sample *t*-test was used to evaluate the relationship between anger expression, mental wellbeing, and emotional expressivity. Linear regression analysis was used to study the effect of anger expression on emotional expressivity and wellbeing among the students, and $p < 0.05$ was considered significant.

RESULTS

Table-1 shows the psychometric characteristics of the research variables. Reliability analysis shows that the reliability coefficients of the anger expression, mental wellbeing, and emotional expression are 0.74, 0.76, and 0.86, respectively. Aggression had a significant negative correlation with psychological wellbeing ($r = -0.45$,

$p < 0.001$) and aggression had a significant positive correlation with emotional expression ($r = 0.26$, $p < 0.001$). Mental wellbeing showed a negative correlation with emotional expression ($r = -0.11$, $p < 0.001$).

Table-2 reveals mean, standard deviation and *t*-value for orphan and non-orphan adolescents on anger expression, mental wellbeing and emotional expressivity. Orphan students score high on anger expression (Mean=27.62, $p < 0.001$) as compare to non-orphan adolescents (Mean=23.59, $p < 0.001$). Non-orphans adolescents score high on mental wellbeing (Mean=26.30, $p < 0.001$) as compare to orphans (Mean=22.49, $p < 0.001$), and orphan adolescents significantly score high on emotional expressivity (Mean=55.28, $p < 0.05$) as compare to non-orphans (Mean=53.99, $p < 0.05$).

Table-3 shows mean, standard deviation and *t*-value for male and female adolescents on anger expression, mental wellbeing and emotional expressivity. Male adolescents scored significantly high on anger expression (Mean=28.10, $p < 0.001$) as compare to female adolescents, (Mean=23.11, $p < 0.001$). Female adolescents score high on mental wellbeing, (Mean=25.68, $p < 0.001$) compare to male (Mean=23.11, $p < 0.001$). Male adolescents scored high on emotional expressivity (Mean=54.66) as compare to females (Mean=53.93); but the differences were statistically non-significant ($p > 0.05$).

Table-4 depicts the liner regression analysis calculated with expression of anger as predictable variable and emotional expression as outcome variable. The expression of anger was significantly positive predictor of student emotional expression ($\beta = 0.26$, $p < 0.001$). The anger expression had significant negative effect on mental wellbeing ($\beta = -0.445$, $p < 0.001$).

Table-1: Psychometrics properties among study variables (n=200)

Variable	n	Mean±SD	α	1	2	3
Anger Expression	200	25.6±5.94	0.74	-	-0.45*	0.29*
Mental Wellbeing	200	24.39±4.14	0.76		-	-0.11
Emotional Exp	200	54.29±5.96	0.86		-	-

* $p < 0.001$

Table-2: Mean, standard deviation and *t* values for orphans and non-orphans among anger expression on mental wellbeing and emotional expressivity (n=200)

Variable	Orphans (n=100) Mean±SD	Non-orphans (n=100) Mean±SD	<i>t</i> (198)	<i>p</i>	95% CI		Cohen's d
					LL	UL	
Anger expression	27.62±5.4	23.59±5.79	5.08	0.000	2.46	5.59	0.71
Mental wellbeing	22.49±3.99	26.30±3.34	7.31	0.000	4.83	2.78	1.03
Emotional expressivity	55.28±5.79	53.31±5.99	2.36	0.019	0.32	3.61	0.33

Table-3: Mean, standard deviation and *t* value for male and female anger expression on mental wellbeing and emotional expressivity (n=200)

Variable	Males (n=100) Mean±SD	Females (n=100) Mean±SD	<i>t</i> (198)	<i>p</i>	95% CI		Cohen's d
					LL	UL	
Anger expression	28.1±5.53	23.11±5.27	6.52	0.000	3.48	6.49	0.92
Mental wellbeing	23.11±4.22	25.68±3.68	4.6	0.000	3.67	1.46	0.64
Emotional expressivity	54.66±6.31	53.93±5.59	0.86	0.388	0.93	2.39	0.12

Table-4: Liner regression analysis showing the effect of anger expression on emotional expressivity and mental wellbeing among students (n=200)

Variables	β	95% CI	
		LL	UL
Emotional Expressivity			
(constant)	47.39*	43.83	50.95
Anger Exp	0.26	0.134	0.405
R ²	0.067		
F	15.39*		
Mental Well-being			
(constant)	32.51*	30.23	34.8
Anger Exp	-0.455	-0.404	-0.23
R ²	0.203		
F	51.78*		

*p<0.001

DISCUSSION

In the first step reliability of the scales was ensured. The reliability conformed that the scales State Trait Anger Expression Inventory (STAXI), Short Warwick Edinburg Well-being scale (SWEMWBS) and Berkeley Expressivity Questionnaire (BEQ) had satisfactory internal consistency.

The first hypothesis ‘Anger expression will negatively correlate with mental well-being of orphan male adolescents’ was supported in the present study. Mental wellbeing of orphan male adolescents slightly correlates with anger expression but not very highly negatively correlate with anger expression, it may be because of supportive care system for orphans in our community. The current findings are consistent with the prior research which reports that mental health and wellbeing during adolescence are strongly influenced by life experiences and relationships¹⁷, and social support is found to be associated with mental health¹⁸.

Second hypothesis ‘Anger expression positively correlates with emotional expressivity of orphan male adolescents’ was supported in our findings. Other work¹⁹ shows that boys tend to be more physically aggressive, but verbal aggression is often referred to as relational aggression and is more common in girls. Additionally, they can struggle to find motivation for long-term goals, such as delaying immediate gratification.

Third hypothesis ‘Orphan male adolescents show more anger expression than orphans female adolescents’ was supported by the present study. Girls reported more emotional deprivation and abandonment than boys. Girls as children are more sensitive and fragile than boys and require more emotional care. Another common aspect of women is shame. A comparison of girls and boys showed that they did not differ in gender in terms of variable dissatisfaction, satisfaction, anxiety, fear of new situations, sleep disorders, and difficulty making friends. Nonetheless, there was a considerable difference in the magnitude of anger, desire to escape, and hope for the future.

Fourth hypothesis ‘Non-orphans adolescents show less anger expression that has less effect on mental wellbeing and emotional expressivity’ was also supported in the present study. Children and adolescents are taught that expressing anger or annoyance on every occasion in the home environment is not a positive behavior.²⁰ Orphanage children had more mental health problems than foster children. Most studies have shown that orphans are more likely to experience psychosocial problems than non-orphan peers.^{11,12,20} Gender and age were not significantly associated with mental wellbeing. Parental involvement is primarily related to the psychological adaptation of the child.²¹

CONCLUSION

Anger expression is positively linked with emotional expressivity and negatively linked with mental well-being. Girls are shy to express their feelings as compared to boys. Boys are more engaged in verbal and physical aggression than girls. Orphan boys show more aggression because they face a lot of adjustment and many other difficulties in institutions. Non-orphan adolescents show less aggression; it may be because they are taught under the supervision of both parents not to express their anger.

IMPLICATIONS OF THE STUDY

The current study findings highlighted the need of developed supportive care system in our society. Mental well-being of orphan adolescents should be improved by providing proper support and care systems.

LIMITATION AND SUGGESTIONS

This was a single centre study. Similar work should also be done in other areas of the country, and in other social settings too.

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Received: 20 Dec 2021

Reviewed: 31 May 2021

Accepted: 1 Jun 2022

Contribution of Authors:

SMA: Research Idea, Data Analysis

AK: Article writing

MIB: Data Collection

KY: Editing and proof reading

Conflict of interest: None to declare

Funding: None to declare