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RELAX Alternatives to Anger: Examining the Experiences of Latino Adults in an Anger Management Program

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Anger Management Education (AME) is a growing genre of Family Life Education and Extension that shows promise in helping individuals manage the frequency and intensity of their anger. The majority of research using AME, however, has primarily examined outcomes from high-risk populations such as incarcerated populations, delinquent youth, and couples in relationship duress. This study examines the perceived benefits and experiences of 36 Latino adult participants in the RELAX: Alternatives to Anger family life education program. Five themes emerged using data from five focus group interviews depicting positive evaluative findings among participants, including (1) anger management strategies, (2) understanding anger, (3) improved relationships, (4) social support, and (5) cultural influence of anger. Implications for developing and implementing AME programming for Latino audiences are described.

Keywords: anger management education, Latino, family life education

Introduction

Anger management education [AME] is an increasing area of family life education [FLE] that has gained renewed interest in recent years. Originated as part of cognitive behavioral therapy, AME has developed into an independent educational genre showing promise in helping individuals manage the frequency and intensity of their anger (Pierce, Pierce, & Gies, 2013). Although anger expression does not necessarily lead to aggression, studies indicate that increased anger leads to acts of outward aggression, increased stress, emotional trauma, drug and

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alcohol abuse, and family violence (DiGiuseppe & Tafrate, 2006). Alternatively, scholars note the importance of anger as a healthy means of expressing important emotions, but these expressions must be conveyed appropriately (Pierce et al., 2013).

Evaluative data from meta-analyses of anger management interventions have consistently demonstrated at least moderate effectiveness among both non-clinical and psychiatric populations (Lee & DiGiuseppe, 2018). The majority of AME programs have historically targeted at-risk populations that primarily include incarcerated individuals (Breiner, Tuomisto, Bouyea, Gussak., & Aufderheide, 2012; Nelson & Olcott, 2006), delinquent youth (Ang, Huan, Chua, & Lim, 2012; Brännström, Kaunitz, Andershed, South, & Smedslund, 2016; Raval, Raval, & Becker, 2012; Walker & Bowes, 2013), and other therapeutic samples and services (Hosseini, Mokhberi, Mohammadpour, Mehrabianfard, & Lashak, 2011; Mackintosh et al., 2014; Morland et al., 2010). Although important, these programs often focus on a clinical intervention approach to managing anger-related and aggressive behaviors (Yekta, Zamani, Parand, & Zardkhaneh, 2011). Today, few AME programs have been developed and evaluated for broader low-risk adult audiences in non-therapeutic settings (Lee & DiGiuseppe, 2018).

Non-clinical AME programs are often provided as group-formatted educational experiences, which generally serve as a preventative measure taken prior to more intense intervention or therapeutic approaches. To the authors' knowledge, relatively few non-clinical AME programs target ethnically diverse populations. Those that do are generally included in broader educational programming efforts such as responsible fatherhood or relationship education programming (Anderson et al., 2013). The majority of evaluated AME that serves ethnically diverse populations comes from incarcerated or high-risk clinical samples (Lee & DiGiuseppe, 2018). This focus limits our understanding of how AME can be used as a preventative strategy, particularly among minority populations who are considered 'low-risk' for clinical interventions. With the growing number of minority populations within the United States, scholars and practitioners are consistently calling for the evaluation of FLE programs among diverse audiences (Duncan & Goddard, 2016). These study results are intended to feed curricular adaptations and development efforts for culturally appropriate programming among ethnically diverse and non-English speaking audiences (Davis & Rankin, 2006). Given that Latinos are the largest minority group in the United States, the purpose of this study was to examine the benefits and experiences of non-clinical, Latino adult participants in an FLE anger management program.

Literature Review

The majority of AME programming today shares a common mission to teach anger management strategies as preventive or intervention methods among those at-risk for negative anger consequences (Thomas, 2001). Most commonly, this includes targeted programming to inmate populations, delinquent school-aged children, and those under relationship duress (Howells & Day, 2003). AME content primarily focuses on defining types of anger, coping strategies,

identifying underlying causes of anger, anger management strategies, and appropriate reactions to stress and anger (Dowden & Serin, 2001; Howells & Day, 2003; Margolin, 1979). Most anger management interventions are provided in two formats: 1) independent programming that focuses on anger management techniques and skills, and 2) integrated programming within other intervention efforts such as couple therapy or relationship education programming (Deffenbacher, Oetting, & DiGiuseppe, 2002).

Evaluative findings of AME's effectiveness suggest that participants can acquire a diverse set of skills and benefits. These include increased verbal reasoning and communication, constructive anger management, improved conflict resolution skills, emotional stability, family life, and reduced anger, stress, and violence levels (Fetsch, Yang, & Pettit, 2008; Percival, 2010; Pish, Clark-Jones, Eschbach, & Tiret, 2016; Watt & Howells, 1999). These benefits tend to vary based on the population and setting in which AME is implemented. For example, AME is commonly implemented in prisons and has been shown to improve anger control, greater self-awareness, and improved violent behaviors (Percival, 2010). However, these programs may be less effective when used in other settings where anger and aggression may be less prevalent or intense (e.g., public schools, therapy) (Dowden & Serin, 2001).

Anger Management Education among Latino Populations

Latinos are currently the largest minority group in the U.S., with more than 17% of the total population being of Hispanic or Latino origin compared to approximately 14% African American, and 10% identifying as another ethnic group (e.g., Asian, Native American). Latino populations are the fastest-growing ethnic group in the United States, with future projections suggesting a 115% increase in the Latino U.S. population by 2060 (Colby & Ortman, 2015). Due to these evolving demographic changes, scholars are emphasizing the need to understand the unique needs and experiences of this growing population (Herrmann & McWhirter, 2003).

Latino populations differ significantly from their Caucasian, non-Hispanic counterparts. Among the most commonly noted differences are the likelihood of recently immigrating, greater racial and ethnic discrimination, and living in poverty (Foulkes & Schafft, 2010). In general, Latino populations maintain strong cultural ties to their country of origin, are religious, and hold strong traditional family values and cultural norms (i.e., *machismo*) (Parra-Cardona & Busby, 2006). One such value is *familism*, which refers to the strong family cultural ties that prioritize child and family needs over individual desires. This further validates the collectivistic nature of Latino populations, emphasizing community and extended family over individual needs (Sabogal, Marin, Otero-Sabogal, Marin, & Perez-Stable, 1987). These unique cultural values influence daily behaviors and traditions of Latino families including the parenting, work-family responsibilities, and gender roles they sustain. These differences have led family life scholars and practitioners to adapt existing, or develop new, family life programming to incorporate these unique cultural qualities (Domenech-Rodriguez, Baumann, & Schwartz, 2011).

Recent efforts to develop FLE for Latino audiences include efforts to increase programming among minority inmate populations and recent fatherhood and relationship education initiatives (Taylor, 2010). These programs generally include substantive AME content and are used in conjunction with other FLE content to collectively improve targeted outcomes such as decreased violent behaviors or improved healthy couple relationships (Dion, Zaveri, & Holcomb, 2015; Levesque, Johnson, & Prochaska, 2017; Lucier-Greer, Adler-Baeder, Harcourt, & Gregson, 2014). The most extensive literature focusing on ethnic minority participants in AME comes from imprisoned populations reporting reduced levels of anger and conflict in post-program evaluations (Henwood, Chou, & Browne, 2015; Rios, 2007). Although these findings show promise in improving targeted outcomes, incarcerated populations are unique in that they experience greater levels of anger, trauma, and exhibit more violent behaviors compared to non-incarcerated populations (Bahrami, Mazaheri, & Hasanzadeh, 2016). Therefore, the experiences and impacts of these participants in AME cannot be easily generalized to broader audiences.

Among relationship, fatherhood, and parenting education programs, increased efforts to adapt content to serve Latino audiences is well underway. These programs, although not AME specific, provide couple and parent-child relationship educational content that often includes healthy communication and anger management components (e.g., Prevention and Relationship Education Program) (Anderson et al., 2013). Additionally, these programs play an important role in developing best practices in FLE, including how to appropriately serve Latino audiences by incorporating culturally appropriate content into existing curriculum (e.g., Skogrand, Barrios-Bell, & Higginbotham, 2009). Among these programs, several large-scale efforts targeting low-income and Latino minority population groups show significant improvements in relationship quality, communication, and other positive family outcomes (e.g., Reck, 2013). However, it is difficult to determine what role AME content plays in the positive outcomes of these programs because it is commonly integrated with other relationship and parent education information (Fetsch et al., 2008).

Study Purpose

This study examines the experiences of Latinos in an AME program targeted toward a general audience as a non-clinical relationship education and prevention strategy. Current gaps in extant literature exist among AME targeting general diverse populations, particularly Latino audiences that are not at high-risk for anger, violence, or in relationship duress. Study results of FLE among ethnically diverse groups are needed to add understanding for future curricular adaptations and development efforts (Davis & Rankin, 2006). The research questions for this study were (1) What are the perceived benefits of RELAX as reported by Latino participants; and (2) What are the experiences of Latino adults in RELAX.

Methods

This study examined the perceived benefits and experiences of Latino adults who participated in the RELAX: Alternatives to Anger FLE program (RELAX) in a Midwestern state. RELAX is a four-module program generally provided in small- and large-group formats to adult audiences (Michigan State University Extension, 2012). The title of RELAX is an acronym. Each letter represents one of the core concepts of the program: R-recognizing your anger signals; E-empathizing; L-listening; A-accepting; and X-x-ing out the past. The overarching goal of the program is to actively engage adult participants in gaining knowledge and skills to constructively deal with anger. The course is provided in English and Spanish.

Participants

The sample for this study consisted of 36 Latino adults who completed the RELAX program. Participants for this study were gathered from a convenience sample (Etikan, Musa, & Alkassim, 2016) of adults who chose to attend post-program focus group interviews held at the end of the last session of the RELAX course. Five focus group sessions were conducted at different locations across a Midwestern state during a six-month period. Participants were recruited to the RELAX course by invitation using listservs from Spanish-speaking program instructors. A light meal was served during each focus group, and all participants were given a \$20 gift card to a local grocery store at the completion of the focus group. Focus group participant ages ranged from 30 to 93 with an average age of 50. Three focus groups consisted of all female participants, and two focus groups were mixed male/female. Of the 36 participants, 83% identified as female (n = 30), 13% identified as male (n = 5), and one chose not to report. Thirty-four participants identified as Hispanic/Latino Non-White, one as Hispanic/Latino White, and one chose not to report. For educational attainment, 47% of participants reported completing junior high school (n = 17), 19% completed high school or Graduate Equivalency Degree (GED) (n = 7), 8% reported completing some college (n = 3), 8% reported completing an Associate's degree (n = 3), 5% reported completing a postgraduate degree (n = 2), and four chose not to report. Sixty-four percent reported they had not received food stamp benefits in the past 12 months (n = 23), 28% reported having received food stamp benefits in the past year (n = 10), and three participants chose not to report. RELAX courses in this study were taught in Spanish by Latino instructors, or in one case, translated by a Spanish interpreter. All focus group sessions were conducted in Spanish.

Data Collection

One Spanish-speaking instructor from the state's university Cooperative Extension program oversaw the implementation of the focus group interview sessions. An inductive and interactive process of data collection was used to capture the perceived benefits and experiences of focus group participants and develop meaningful themes (Nastasi & Schensul, 2005). Focus group

interviews were audiorecorded, transcribed verbatim, and translated by a member of the research team prior to data analyses.

Focus group interviews were conducted using pre-arranged, open-ended questions. These questions were used to guide participants into an in-depth discussion about the benefits and experiences they had as part of the RELAX course. Questions centered around participants' experiences, the course's effectiveness in addressing appropriate AME content as it relates to Latino populations, positive and negative experiences, and changes for future implementation. When appropriate, the interviewer asked clarifying and follow-up questions.

Data Analyses

Researchers were trained in the qualitative analysis procedures prior to the beginning of the analyses of this study to ensure consistency between researchers (Bogdan & Biklen, 2007; Fram, 2013; Nowell, Norris, White, & Moules, 2017). The procedures used to conduct the thematic analyses for this study were described by Bogdan and Biklen (2007). This process incorporates a deductive-inductive approach to analyses and interpretation of data as well as grounded theory principles (Fram, 2013). This approach includes the reading and rereading of study transcripts to gain a 'totality' of participants' perceptions, then identifies common themes that emerge from the data. Researchers read and reread the study transcripts. Researchers then collectively developed coding categories and themes based on the reoccurrence of participants' responses. When needed, researchers referred to the data to ensure appropriate meaning of participants' responses. Researchers coded transcripts independently of one another. Qualitative analysis software, NVivo 10 (QSR International, 2016), was used to individually code transcribed interviews. When completed, researchers compared codes to ensure validity of the data. Any code having less than 85% agreement between researchers as identified by the NVivo 10 comparison analyses was reviewed to ensure the accurate understanding of the data.

Five researchers served as coders. Two had advanced degrees relevant to FLE and Extension and led the data analysis process. Each researcher was trained in qualitative coding procedures by the lead researcher who had experience in analyzing and publishing qualitative research. Two of the researchers were of Latino descent, spoke Spanish, and provided cultural guidance to the research team.

Findings

This study included two major research questions: (1) what are the perceived benefits of RELAX as reported by Latino participants, and (2) what are the experiences of Latino participants in RELAX. The major themes found for the first research question of this study included (1) anger management strategies, (2) understanding anger, and (3) improved relationships. The major themes found for the second research question of this study included (1) social support and (2)

cultural influence of anger. Major themes and subsequent subthemes are organized in order of greatest prevalence with supportive quotes to illustrate the theme.

RQ1: Anger management strategies (60 References)

The most common theme found among participants reporting on the benefits they experienced from RELAX was how it provided participants with an opportunity to gain anger management skills and strategies. As one participant stated, "This class helped me learn how to control my anger in a higher way" [Female, age 38]. Others described learning about anger as "a process" in which they did not know prior to taking the course. As stated by one woman, "it is a process. Like we say, there are obstacles that we have to overcome. Find a solution and don't stay with the problem" [Female, age 36].

Some participants provided specific examples of AME content that were beneficial to them. This resulted in four subthemes related to anger management strategies. These subthemes are presented in order of highest prevalence.

Calming mechanisms. The most common anger management strategy referenced by participants was learning about calming mechanisms. Calming mechanisms refer to participants learning how to lower their anger levels. The most common strategies identified by participants included deep breathing, counting, listening to music, being alone (e.g., taking a time out), distracting oneself, reading, walking, going outside, going for a ride, and finding a physical outlet (e.g., hitting something). One strategy noted by one participant as an example was reading: "One thing that I am learning now is reading. This is a way to get distracted. It has been working for me. It takes away all the ire I have inside of me" [Male, age 35].

Using calming techniques allowed participants to prepare for future solutions. For example, one woman stated, "Relax, count, then do what you have to do. When you are relaxed, without so many things in her head, you think better" [Female, age 53]. Another woman stated,

How can I find solutions [to my anger]? We were given the tools to find solutions and to take a time out. So, I can calm down, analyze myself, and think things through instead of thinking, "Let me put my boxing gloves on." [Female, age 31]

Some participants described using visual aids from the course to remind themselves to stay calm. For example, one participant said,

What has particularly helped me is the balloon. I keep it in my living room, and every time I look at it, it reminds me not to blow up. It reminds me [to pause], [think] 'okay,' walk or read. In other words [find] alternatives. [Female, age 36]

The balloon, in this example, represented how anger can build—up and eventually pop if not appropriately diffused. Other participants reflected on their youth or referenced seeing other family members' strategies to calm down, such as

When we were at home, and we were all little, we got mad at each other. Daddy would say, "Go outside. Go around the house until you get tired, then come inside and tell your brother or sister you love them." That is what daddy would tell us. [Female, age 69]

Communication. The second most common anger management strategy learned by participants was healthy communication skills. Participants often expressed an appreciation for learning that it is 'okay' to communicate about their anger, breaking a strong stigma that they had previously held that it was bad or inappropriate to express such feelings. As one woman stated, "I thought that getting mad was bad, and reacting to anger was bad. But no, anger is not bad; it is something normal" [Female, age 40]. This normalization of anger provided a sense of relief to participants, in part because this stigma is reflected within the Latino community. As stated by one woman,

Like they told us in the first class, anger is a feeling. We just have to recognize it to prevent things from happening. [If we don't talk about our anger], the anger gets worse, and it creates a big ball because we do not talk about it, not at all. It is not something that we can say, 'Oh let's go to an anger class because I am very mad.' [Female, age 54]

Once participants felt it was okay to talk about anger, they then expressed how this class allowed them to open up, to think, and communicate about their anger. For example, one man stated, "[This class] opened my mind more. I can listen to others and see what their opinion is. This is something that I am learning, and I did not know before" [Male, age 35]. Participants repeatedly expressed their increased ability to effectively communicate with others because of the course. As stated by another participant, "I think that this is what I needed. I am in a moment when I need to know how to dialogue with another person." This included learning appropriate body language, voice tone, and effective listening. In discussing these, one woman provided an example of how she now speaks with her children: "If you do not look at their face, they will not pay attention to you. Before, I would not listen to them. Now what I do is I get close to them instead of turning my back and yelling" [Female, age 36].

Empathy. The third most common anger management strategy discussed by participants was learning empathy, that is, seeing themselves in another's shoes or taking on another's point of view. When asked what the best part of the class was, some participants stated specifically, "being empathetic" [Male, age 34]. In the RELAX course, empathy is taught in several lessons, but one, in particular, was referenced several times. In this lesson, anger is described as a 'secondary emotion,' meaning that anger precedes another emotion. For example, one may yell thereby seeming to express anger; however, this individual may, in fact, be scared or insecure.

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Learning to empathize with others in a given situation and identify the 'real' emotion was an important lesson learned by participants. As expressed by one woman,

Sometimes we think people are mad, but they are tired. Sometimes when I see someone, I think to myself, "I do not like her because she is mean." But maybe she has a problem, and that is why she is mean. Instead, I should see if there is something I can do to help them. [Female, age 40]

Another woman gave an example of empathy in discussing a recent car accident:

I had a car accident the other day. My car was destroyed completely. But why, because one person was careless, they passed a red light and hit us. In that moment, I was not angry; I was scared for my kids. Then I saw the young boy who hit us; he was trembling, all scared, and almost hysterical. I started to put myself in his shoes and said to myself, I would be the same. This could have been my son. Maybe he is by himself; he does not have his parents here with him. In that moment, I was in a different world, not mine. After this happened, when a car passes by me really fast now, instead of getting mad, I think to myself "Bless them." For me, personally, that is the attitude I am taking now, and it is helping me. [Female, age 36]

Think before acting. The final subtheme discussed by participants was learning to stop and think prior to acting, particularly when upset. Sometimes this included using calming strategies like deep breathing, which would give them time to "think things [through] before taking negative action" [Female, age 52]. This reflective time was described as a means to avoid the potential negative consequences, such as "going to jail" [Female, age 43]. As stated by one woman,

It helps us reflect on if we are doing this wrong and try to improve. There is always an opportunity to improve every day. It does not matter how bad we have been; there is always a first time. [Female, age 53]

This expression of optimism in improving their behavior was reflective of others. As noted, "If we are conscious, and start practicing the things [we learned] on how we can control our anger, we will not make our anger worse. We will try to do it [better]" [Female, age 40].

RQ1: Understanding Anger (52 References)

The second major theme participants described when referring to the RELAX program was the knowledge they gained about themselves and their anger processes. Because of the course, participants were able to recognize and work through their anger. Participants accomplished this in two ways: (1) recognition of their anger and (2) physical reactions to anger.

Recognition of anger. Learning to recognize their anger was an important lesson learned by participants. For some, the course became a time of personal reflection about who they are and what role anger plays in their lives. In describing the best part of the course, one woman stated, "[Getting to] know yourself and how our anger can go down" [Female, age 36]. Another stated, "We now know the reality of our anger, and how it is a big thing in our lives" [Female, 51]. This realization was important in learning to manage anger. As stated by one participant, "Anger is from us" [Female, age 53]; therefore, they are responsible for managing their anger.

An important lesson of the RELAX program is to help participants define anger. Anger is a feeling. This was an important lesson expressed by many participants. As one participant expressed, "Anger is a feeling, and we can handle it in different ways without hurting others" [Female, age 38]. Participants further expressed anger as a complex construct, which includes many emotions. As one woman explained,

We have never been taught how to express our feelings by name. In the exercise about talking about our feelings, it was hard for us to express another word but mad. [Anger], it is not just one, two, or three emotions, but more than 50. [Female, age 31]

Once participants were able to describe anger as being a part of them, they often explained the importance of being actively aware of their anger. In referring to individuals outside of the RELAX course, one participant stated, "One does not pay attention to if, or when, they get mad" [Female, age 36]. Another noted, "Because we do not take time to go to programs, we do not take time to see [our anger]. But, if we become more conscious, we can take our anger and say, 'Okay, I have this because I am recognizing it" [Female, age 36]. Gaining an awareness of their anger and making a conscious decision to be aware of it was a concept some participants had not considered before. As expressed by one individual, "I liked learning what makes me mad, because before I would get mad and I did not know why" [Female, age 43].

As a result of recognizing their anger, participants explained that they were now able to identify where they needed to improve. This, at times, was expressed through gratitude for the class, as stated by one participant, "Thank you for giving me the opportunity to learn, and to recognize where we are wrong, and what we have to work on" [Male, age 34].

Physical reactions to anger. Throughout the focus groups, participants discussed ways in which they reacted to anger both before and after attending RELAX. Many of these descriptions related directly to anger management skills learned through the program, such as calming strategies, effective communication, etc. Additionally, however, participants described learning that anger and stress are interconnected and may be presented through physical symptoms.

Many participants in the program were unaware of the physical symptoms and anger, such as headaches, aches and pains, and sleep deprivation, to name a few. This knowledge was impactful to several participants. As described by one woman, "I was always tired or had a

headache. I would ask myself 'Why?' Now, I realize that every time I am angry or stressed, my body reminds me" [Female, age 36]. Several participants expressed experiencing physical implications either because of, or in conjunction with, anger and stress. Participants, therefore, learned that if they could remain aware of their bodies, they could better identify when they are angry or stressed. These physical symptoms served as a reminder to address the real cause of the symptoms. As explained by one participant, "Sometimes we get mad. We do not pay attention to our body, and then your back hurts, your head hurts, your stomach hurts. Sometimes you think something got you sick, but nothing got you sick, it was your anger" [Female, age 36].

RQ1: Improved Relationships (44 References)

The third major theme expressed by participants was improving relationships. As stated by one participant, "Mexicans need a lot of information regarding anger to improve our community, our kids, and the family" [Female, age 46]. The desire to improve family relationships, as well as the larger community, seemed to be a strong belief among most participants and served as a motivation to implement the lessons learned from the RELAX course. As stated by one participant, "There are people that have not received this information. This can help them not only with this type of problem but with many other things" [Female, age 77]. Although not explicitly stated, participants seemed to hold a sense of responsibility to share the lessons they learned with others. This was particularly apparent when participants discussed teaching their children and breaking negative habits they had learned from their parents. As stated by one participant, "[Taking this course is important because] we can educate our kids better when they are younger. Like when our parents did us different, we are trying to do different for them." This was reiterated by another participant stating, "We don't want to repeat [the negative things] our parents did to us. We need to be ourselves and not follow our parents [bad] habits." In discussing this major theme, two subthemes emerged. First was improving the parent-child relationship and second was improving the couple relationship.

Parent-child relationship. The most common familial reference described by participants when referring to improving family relationships was the parent-children relationship. The importance of using the learned skills to improve parenting practices was particularly prevalent among program participants. One strategy participants discussed was learning about the importance of being aware of and understanding their children. These lessons seemed most beneficial to participants whose children were struggling with a separation or divorce. As explained by one participant,

I have to think of the kids and their feelings. They are going through a lot of pain with the separation of their parents. It is a pain they will never overcome. As kids, [we shouldn't] put more problems on them. They are kids, and we put a bigger weight [on them] to carry. [Learning these skills] will help make things easier." [Female, age 42]

By implementing the lessons learned from RELAX, parents were hopeful that they could minimize their children's distress and expressed empathy and understanding toward them. As explained by another participant in describing the struggle of co-parenting across households,

I am separated. My kids go with their father one weekend or during vacations, and they come home happy. I want them to be happy, so the first thing I ask them is 'How did things go?' The first thing they share with me is about the stepsister, how my ex-partner and their spouse treated them. They share with me with so much familiarity that I have to look at it as something normal. Them talking about it is okay as long as they are happy and relaxed. I feel good. [Female, age 40]

This is one example of how parents realized the importance of placing their children's feelings above their own anger. This parent showed how she had become more aware and understanding of her children, their happiness, and as a result, can now take part in their joy rather than let her conflicting feelings about their father's relationships interfere.

Another important lesson expressed by parents was learning to communicate better with their children. As described by one participant, the RELAX program "help[ed us] to not hurt our kids. I have always wanted to learn how I can talk to my kids without hurting them" [Female, age 54]. Others further expressed the plans to change how they communicate with their children in the future. As an example, one father stated, "I am not going to scream at my kids no more" [Male, age 69]. Some parents indicated that this harsh parenting style was cultural in nature, and the RELAX course helped them find more effective means of communicating with their children. As explained by one mother, "We bring this, the screaming, from our culture. This does not work for me with my kids. Now instead of screaming, I stop so I can look at them and pay attention. That does work for me" [Female, age 36].

One area in which participants expressed improvement in their relationships with their children was in the way they disciplined. As described in the first major theme, parents described gaining new alternatives to expressing their anger, which in turn affected how they discipline their children. For example, several participants discussed the use of spanking as a disciplinary means; however, this approach they stated was ineffective at times and would usually increase their anger. As one mother described, "When you get mad, you just want to hit them so bad [spanking], and you do not want to think about it until afterwards. So, you should think about your actions before you spank" [Female, age 40]. Because of the course, parents learned the importance of calming down and finding alternative, yet appropriate means of disciplining their children. For example, during one focus group, two participants discussed possible alternatives to spanking: "You have to take some things away from them" [Female, age 77] and "Yeah! Like if they have a phone or iPad. Take it away. Then they will say "I'm sorry" [Female, age 43].

Although improved understanding, empathy, communication, and discipline practices were the most common parenting practices discussed by participants, less prevalent practices included

having patience, giving attention, and becoming more involved in children's lives. Furthermore, parents described the importance of setting a positive example for their children as they demonstrated ways to effectively communicate and control their anger and emotions.

Couple relationships. A second family relationship that was referenced by participants, but not as often as parent-child, was improving the couple relationship. Several participants recommended that the course be given to couples in romantic relationships. For example, one participant recommended, "It should be given to those in marriages; the couple together" [Female, age 52] or as another stated, "to newlyweds" [Female, age 70]. The desire for couples to participate in RELAX seemed to be linked to the benefits individuals gained within their own relationships. This was most regularly referenced by individuals discussing how they applied their newly-acquired anger management skills to their relationships. The most common skills referenced that impacted couples' relationships included learning to control one's anger, communicating effectively, compromising, and using calming mechanisms. One participant gave an example of how her relationship improved through effective communication, stating, "They [her partner] say what they think, and you say what you think, and we can come to an agreement" [Female, age 52].

RQ2: Social Support (28 References)

In moving beyond the reported benefits of RELAX, Latino participants were asked about their experiences more broadly and in the context of the curriculum's appropriateness for Latino populations. These questions led to two major themes in answer to the second research question of this study. The first of these themes was the experience of social support felt among Latino participants throughout the course. This theme goes beyond a benefit that participants received through skill-building (i.e., anger management strategies) but relates to the desire to learn and grow as part of a community.

Social support was described by participants as having developed friendships with others in the course, expressing gratitude that participants found a place to share their difficulties, listen to others and participate in conversation, and feel included as part of the larger group or class. As with most classroom experiences, this camaraderie took time to develop; however, participants seemed to relish the friendships they acquired as part of the course. As stated by one woman, "[It was hard to] interact, but then we relaxed, and we were able to open up a little more. We knew the reality of our anger and know that anger is a big thing in our life" [Female, age 38].

Participants found commonalities and support with each other as they shared their anger management struggles in the RELAX course. Having difficulty controlling anger was a shared experience by all participants in the course. When referring to the class, one woman stated, "It is very important that we have been able to express what we feel and what we have gone through." This group communication was described as a positive experience, allowing participants to "vent" [Male, age 67] to others like themselves. Another participant stated, "This [class] is good

because we can talk about it [our experiences] with a friend" [Female, age 53]. Even though participants came from various backgrounds, as one woman stated, "We all have different points of view and different problems. [The course] was a great help to us. We are not the same person from when we initially started" [Female, age 40]. Several described going through the course together as a therapeutic process, allowing individuals to open-up and identify with others. As described by one woman, "I liked every lesson; it was like therapy" [Female, age 54].

RQ2: Cultural Influence of Anger (8 References)

The second theme that emerged when examining Latino participants' reported experiences in RELAX was the cultural influence or relevance of anger within the Latino community. Although small, this theme seemed unique and significant in that several individuals described anger as not only a definable human emotion but also an inherent part of their culture. As described by one woman, "I see that a lot of our people [Latinos], it is very easy to get angry . . . We see anger as something normal and that it was inherited to us" [Female, age 36]. This idea was referenced by other participants, such as, "I think we, the Latinos, we blow up real fast with little things" [Female, age 77]. Another participant continued, "We realize that with this type of anger, we are becoming a community where we are destroying ourselves. If we continue in this state, it will take us to worse things" [Female, age 36].

Participants in this study further expanded on this idea by explaining that anger is not only seen as negative within the Latino community, but seeking help for anger problems is highly stigmatized. As stated by one participant, "In our culture, it is said that you are a bad person or it is wrong if you are mad. We are taught in our families it looks bad. In our culture, we do not talk about it [anger] at all. It is not something that we can say." Consequently, if an individual is in need of help managing their anger, this participant explained, "One feels worse, and sometimes we think, 'If I go [to a class], it is because I am very wrong."

Some participants connected the prevalence of anger within the Latino community to the broader issues of racism, discrimination, immigration status, and assimilation, all external factors that directly impact the Latino community. As an example, one man stated, "It is hard for the Latinos to relax because we are used. They get mad instantly, and it is hard to learn to relax and not show the strong anger they have" [Male, age 69]. Similarly, another man described,

Sometimes we say they [non-Latinos] are racist, but maybe they are not racist. They do not know our culture well. Maybe it is because of the language. We do not speak it well because we are immigrants, or we fear that nobody will pay attention. [Male, age 35]

Acknowledging some of the larger systemic issues that Latinos face, this participant also offered hope and understanding in that both Latinos and non-Latinos experience anger, which is a shared experience. He continued, "If you could try to push our culture to them, and their culture to us, we can better understand each other knowing we have the same needs" [Male, age 35].

Discussion

In light of the limited research available on the experiences of Latino participants in AME, this study provides insight into the perceived benefits and experiences this population described during the RELAX course. Through qualitative focus group interviews, two research questions were answered through five major themes: (1) anger management strategies, (2) understanding anger, (3) improved relationships, (4) social support, and (5) cultural influence.

Research Question 1: Perceived Benefits of Latino Participation

For the first research question of this study, three major themes were found. In the first theme of anger management strategies, participants described the most meaningful skills they gained as a result of the RELAX course including learning calming techniques, improved communication skills, increased awareness of the importance of empathy, and starting to 'think before they act.' Previous research supports the importance of managing anger through learned coping techniques, which include calming down and developing appropriate reactions to stress and anger (Dowden & Serin, 2001; Howells & Day, 2003; Margolin, 1979). The findings of this study support previous research in that participants learned healthy ways of expressing strong emotions, improved verbal reasoning and emotional stability as demonstrated by participants who reported improved communication skills and increased use of empathy (Fetsch et al., 2008; Percival, 2010; Pierce et al., 2013; Reck, Higginbotham, Skogrand, & Davis, 2012).

One finding in the anger management strategies theme not addressed by previous AME literature is participants reported feeling more comfortable talking about anger. Study participants appreciated learning that anger was a normal and at-times necessary emotion. This helped debunk negative notions that they, as a person, were 'bad' or 'inappropriate' for having such feelings. This finding may be attributed to the AME course content itself, which addressed the normalcy of anger. The group structure of the course may also have contributed since this format fostered shared discussions about feelings of anger. These findings may be common among a broader AME audience; however, having the ability to express feelings of anger may be particularly important to Latino audiences based on the important cultural characteristic, *simpatia*.

Simpatia, meaning 'kindness,' emphasizes the importance of maintaining a pleasant demeanor, being agreeable, and repressing one's anger or aggression (Applewhite, 1999). Within Latino culture, there is a tendency to avoid conflict and confrontation, thereby validating participants' feelings that becoming angry is wrong. These feelings were conveyed by program participants in this study. The RELAX program assisted these individuals in feeling a sense of relief that it was 'okay' to be upset and talk about their anger and how to deal with it appropriately. The relevance of *simpatia* may also be relevant as participants described their hesitancy in participating in the AME course.

The second major theme related to research question one focused on participants gaining a better understanding of themselves and how they are impacted by anger. This included recognizing anger and the physical reactions to anger. Traditional AME includes content that focuses on identifying the underlying causes of anger as well as teaching appropriate reactions and coping skills to reduce stress and anger (Howells & Day, 2003; Margolin, 1979). Participants in this program similarly reported being able to define anger as a complex construct that helped them become aware of their anger. This finding supports previous literature from general AME and among inmate populations that participants can learn to manage the frequency and intensity of their anger by becoming aware of their anger management style, their physical reactions to anger, and then applying calming techniques (e.g., Pierce et al., 2013).

The third major theme for research question one focused on improving family relationships, most prominently the parent-child and couple relationships. This finding is consistent with existing evidence from clinical and adult relationship education programming reporting improved familial relationships and parent-child outcomes (Henwood et al., 2015; Stern, 1999). This suggests that AME can potentially positively impact a broad range of participants, including high-risk clinical patients as well as traditional FLE programming. Findings from this study add to current literature suggesting that Latino adults may also benefit from AME.

Evidence from this study suggesting that Latino participants experienced improved relationships as a result of RELAX may have important cultural relevance. The family is generally viewed in Latino culture as a source of joy and support and is central to one's identity (Hofstede, 1980). Based on the cultural importance and value of the family, *familism*, it was not surprising to see that participants expressed children as important to their family life (Santiago-Rivera, Arredondo, & Gallardo-Cooper, 2002). Scholars have noted that Latinos often describe the parent-child relationship as more important than the couple or other familial relationships (Skogrand, Hatch, & Singh, 2008). Based on these strong cultural influences, it was not surprising to find that the most referenced relationship benefit of the RELAX program related to the parent-child relationship.

Beyond immediate family relationships, *familism* also includes the interdependent nature of Latino families, which emphasizes the collectivistic nature of Latino populations and the importance of the larger community over individual needs (Sabogal et al., 1987). This was reflective in this study's findings by participants indicating a desire for the RELAX program to be offered to others within the Latino community. This idea was often expressed as a 'passing the torch' imagery in which participants felt a responsibility to teach others the lessons they had learned. *Familism* is a multi-faceted value that was depicted in many ways through participant's responses in this study.

Research Question 2: Described Experiences of Latino Participants

The first theme related to research question two focused on increased social support. Increasing social support was not directly taught in the RELAX program; however, participants described the course as therapeutic in nature and allowed them to 'vent' about their challenges among an understanding cohort. Through course attendance, participants described feeling a sense of camaraderie and developed new friendships they would not otherwise have acquired. These ideas parallel previous research suggesting that the acquired social support gained from a group FLE format is perhaps as important to Latino participants as the course content itself (e.g., Skogrand, Torres, & Higginbotham, 2010).

Group format interventions facilitate social support by allowing participants to get to know each other, show empathy, observe how others handle similar challenges, and build social networks that last beyond the duration of the course (Potter-Efron, 2005; Skogrand et al., 2010). Among Latino participants, these social supports may be particularly beneficial given the cultural importance of talking among individuals (Ernst, 1992). Conducting AME in group settings is not uncommon; however, traditional AME is often facilitated in therapeutic settings where small groups of ten or fewer members are included (Potter-Efron, 2005). This study suggests that moderate-sized groups, up to 14 participants in this study, may also benefit from AME given in a non-therapeutic educational setting.

The second theme related to research question two focused on the recognition of the cultural influences of anger within the Latino culture. Although small, this theme seemed significant among study participants as they discussed how feelings of anger were ingrained within and directly impacted the Latino community. For some, anger was seen as a normal part of life – a characteristic passed down from generation to generation resulting in negative familial outcomes. In summation, RELAX provided a unique venue in which participants could share how anger impacted and was a part of the Latino community.

Previous literature examining the prevalence of anger among different ethnic groups is mixed, indicating little consensus among scholars as to whether anger exists more in one ethnic group over another (Johns, Newcomb, Johnson, & Bradbury, 2007). However, some cultural characteristics may help explain why anger was perceived as part of the Latino culture by participants in this study. For example, Latinos are historically depicted as hyper-masculine and aggressive. This is in part due to the cultural norm of *machismo*, which generally refers to a standard of behavior exhibited by Latino men (Arciniega, Anderson, Tovar-Blank, & Tracey, 2008). Although some positive characteristics can be taken from this norm, including having strong familial connections and chivalry, many scholars and surveyed Latinos view *machismo* as a set of negative behaviors and stereotypes citing men as harsh, aggressive, chauvinistic, sexist, and hyper-masculine (Arciniega et al., 2008). Research suggests these negative behaviors can be passed from one generation to the next (Ceballos, 2013), a finding reflected in the current study.

Conclusions and Implications

This study indicates that Latino participants in an AME course can gain important individual and familial benefits. Historically, AME research has primarily targeted high-risk populations that primarily include incarcerated populations, delinquent youth, or couples in counseling services (Ang et al., 2012; Breiner et al., 2012; Mackintosh et al., 2014). Little research exists on the use of AME in less-risky populations, including minority populations in the general population. This study adds to existing knowledge of how Latinos may benefit from AME, including learning anger management and stress reduction skills.

Implications for AME

Findings from this study provide important implications for future AME programming among Latino populations; notably, AME practitioners should carefully consider the relevance of Latino cultural norms, values, and population characteristics as it relates to anger. Among these, include the values of *familism*, *simpatia*, and *machismo*. These values have direct implications for recruiting and retaining program participants, suggested program content, and additional supports that may impact participant outcomes.

Best practices in FLE recommend including children in education programming whenever possible (Duncan & Goddard, 2017). This is especially emphasized when FLE targets Latino populations based on the cultural importance of the family, and in particular, the parent-child relationship, *familism*. Efforts to include children in FLE, particularly among Latino populations, may experience increased participant recruitment, retention, and improved programmatic outcomes (Skogrand et al., 2009). However, including children in AME may not always be possible or appropriate; therefore, practitioners may wish to focus on tailoring content to the interests and motivations of the target population, such as parents wanting to improve family or parent-child relationships (Skogrand, Reck, Higginbotham, Adler-Baeder, & Dansie, 2010). Since a primary goal of many participants in AME is to improve their anger management for the larger benefit of the family as suggested by this study, future AME practitioners may consider adding verbiage to marketing materials related to the potential benefits to these relationships. Furthermore, content related to the importance of the family and benefits to both the parent-child and couple relationship may be emphasized to foster these important relationships.

Another important cultural value to consider when implementing AME among Latino participants is *simpatia*. Participants in this study displayed ideas related to *simpatia* when describing the relief felt in speaking with others like themselves about their anger and the cultural aspects of hiding their anger emotions. This cultural value is critical for practitioners in AME, targeting Latino audiences to understand. Utilizing a strengths-based approach, AME should work to provide a trusted space in which participants can feel validated when expressing emotions and sharing challenges about anger and stress.

One means of creating community is through the use of guided discussions. Within FLE, guided discussions allow participants to gain knowledge from the instructor and classmates who have similar life challenges. Given that increased social support is associated with reduced psychological distress, including decreased symptoms of depression or anxiety during stressful times (Sorkin, Rook, & Lu, 2002), promoting social support among participants through course content or programmatic supports in an AME course may be advantageous.

In providing AME for Latino populations, practitioners should be aware of the realities and perceptions of participants when facilitating conversations related to anger. Practitioners may wish to focus on debunking negative stereotypes related to aggression and the Latino population and instead reinforce positive cultural characteristics, norms, and beliefs. As an example, rather than focusing on negative cultural stereotypes related to *machismo*, such as the expectation for men to be aggressive, practitioners can instead reinforce this as a positive cultural norm emphasizing the importance of strong fatherhood involvement. Practitioners should be aware of the possible contradictions that exist between how cultural values are academically defined and how they are perceived or stereotyped by Latinos themselves.

A final note for those implementing AME among Latino populations is to be aware of the challenges that Latinos face regarding racism and discrimination. As found in this study, anger may be related to ethnic/racial discrimination or immigration status. Past evidence indicates that high levels of perceived and actual discrimination exist among Latinos (Hovey, Rojas, Kain, & Magaña, 2000), resulting in negative physical and mental health outcomes (Williams, Neighbors, & Jackson, 2003). Consequently, it is critical for AME practitioners to understand the complex social issues minority populations experience. For Latinos, this includes but is not limited to citizenship status, discrimination, and the ability to speak English. Unlike Caucasian participants, immigrant Latinos may have additional needs that go beyond the services being provided (Radina, Wilson, & Hennon, 2009). Therefore, practitioners should consider providing additional resources relevant to the targeted population. This will not only contribute to positive programmatic outcomes but will also foster trust and respect (Santiago-Rivera et al., 2002).

Study Limitations

Although the findings from this study provide important insights into the benefits Latino participants may gain from an AME program, limitations remain in the current study. First, this study utilized a focus group, qualitative methodology. Therefore, the findings from this study cannot necessarily be generalized to the larger population nor all Latino groups. Significant diversity exists within the Latino population (Kumpfer, Alvarado, Smith, & Bellamy, 2002). This study focused on Latino participants from one Midwestern state, which may not accurately reflect the diverse beliefs and practices of Latinos across the U.S. Practitioners should, therefore, consider the origins, language, acculturation, and other diversity issues relevant to their targeted Latino population when considering AME implementation. Second, the sample of

this study included mostly females who may have experienced the RELAX program differently than men. Future research should strive to obtain data from additional male participants.

References

- Anderson, J. R., Stith, S. M., Johnson, M. D., Strachman-Miller, M. M., Amanor-Boadu, Y., & Linkh, D. J. (2013). Multi-couple group and self-directed PREP formats enhance relationship satisfaction and improve anger management skills in Air Force couples. *The American Journal of Family Therapy*, 41(2), 121–133. doi:10.1080/01926187.2012.671104
- Ang, R. P., Huan, V. S., Chua, S. H., & Lim, S. H. (2012). Gang affiliation, aggression, and violent offending in a sample of youth offenders. *Psychology, Crime and Law, 18*(8), 703–711. doi:10.1080/1068316X.2010.534480
- Applewhite, S. L. (1999). Culturally competent practice with elderly Latinos. *Journal of Gerontological Social Work, 30*(1-2), 1–15. doi:10.1300/J083v30n01_01
- Arciniega, G. M., Anderson, T. C., Tovar-Blank, Z. G., & Tracey, T. (2008). Toward a fuller conception of machismo: Development of a traditional machismo and caballerismo scale. *Journal of Counseling Psychology*, *55*(1), 19–33. doi:10.1037/0022-0167.55.1.19
- Bahrami, E., Mazaheri, M. A., & Hasanzadeh, A. (2016). Effect of anger management education on mental health and aggression of prisoner women. *Journal of Education and Health Promotion*, *5*(5), 1–5. doi:10.4103/2277-9531.184563
- Bogdan, R. C., & Biklen, S. K. (2007). *Qualitative research for education: An introduction to theories and methods* (5th ed.). Boston, MA: Pearson.
- Brännström, L., Kaunitz, C., Andershed, A., South, S., & Smedslund, G. (2016). Aggression Replacement Training (ART) for reducing antisocial behavior in adolescents and adults: A systematic review. *Aggression and Violent Behavior*, *27*, 30–41. doi:10.1016/j.avb.2016.02.006
- Breiner, M. J., Tuomisto, L., Bouyea, E., Gussak., D. E., & Aufderheide, D. (2012). Creating an art therapy anger management protocol for male inmates through a collaborative relationship. *International Journal of Offender Therapy and Comparative Criminology*, 56(7), 1124–1143. doi:10.1177/0306624X11417362
- Ceballos, M. V. (2013). *Machismo: A culturally constructed concept* (Doctoral dissertation). Retrieved from Fresno State Digital Repository. Retrieved from http://repository.library.fresnostate.edu/handle/10211.3/105401
- Colby, S. L., & Ortman, J. M. (2015). *Projections of the size and composition of the U.S. population: 2014 to 2060* [Current Population Reports, No. P25–1143]. Washington, DC: U.S. Census Bureau. Retrieved from https://www.census.gov/content/dam/Census/library/publications/2015/demo/p25-1143.pdf

- Davis, P. C., Jr., & Rankin, L. L. (2006). Guidelines for making existing health education programs more culturally appropriate. *American Journal of Health Education*, *37*(4), 250–252. doi:10.1080/19325037.2006.10598912
- Deffenbacher, J. L., Oetting, E. R., & DiGiuseppe, R. A. (2002). Principles of empirically supported interventions applied to anger management. *The Counseling Psychologist*, 30(2), 262–280. doi:10.1177/0011000002302004
- DiGiuseppe, R. A., & Tafrate, R. C. (2006). Anger treatment for adults: A meta-analytic review. *Clinical Psychology: Science and Practice*, 10(1), 70–84. doi:10.1093/clipsy.10.1.70
- Dion, M. R., Zaveri, H., & Holcomb, P. (2015). Responsible fatherhood programs in the Parents and Children Together (PACT) evaluation. *Family Court Review*, *53*(2), 292–303. doi:10.1111/fcre.12140
- Domenech-Rodriguez, M. M., Baumann, A. A., & Schwartz, A. L. (2011). Cultural adaptation of an evidence based intervention: From theory to practice in a Latino/a community context. *American Journal of Community Psychology*, 47(1-2), 170–186. doi:10.1007/s10464-010-9371-4
- Dowden, C., & Serin, R. (2001). Anger management programming for offenders: The impact of program performance measures (Research Report No. R-106). Ottawa, Canada: Correctional Service of Canada.
- Duncan, S. F., & Goddard, H. W. (2016). Family life education: Principles and practices for effective outreach (3rd ed.). Thousand Oaks, CA: Sage.
- Ernst, L. (1992). Celebrating diversity. Minneapolis, MN: Family Information Service.
- Etikan, I., Musa, S. A., & Alkassim, R., S. (2016). Comparison of convenience sampling and purposive sampling. *American Journal of Theoretical and Applied Statistics*, 5(1), 1–4. doi:10.11648/j.ajtas.20160501.11
- Fetsch, R. J., Yang, R. K., & Pettit, M. J. (2008). The RETHINK parenting and anger management program: A follow-up validation study. *Family Relations*, *57*(5), 543–552. doi:10.1111/j.1741-3729.2008.00521.x
- Foulkes, M., & Schafft, K. I. (2010). The impact of migration on poverty concentrations in the United States, 1995-2000. *Rural Sociology*, 75(1), 90–110. doi: 10.1111/j.1549-0831.2009.00002.x
- Fram, S. M. (2013). The constant comparative analysis method outside of grounded theory. *The Qualitative Report*, 18(1), 1–25. Retrieved from https://nsuworks.nova.edu/tqr/vol18/iss1/1
- Henwood, K. S., Chou, S., & Browne, K. D. (2015). A systematic review and meta-analysis on the effectiveness of CBT informed anger management. *Aggression and Violent Behavior*, 25(Part B), 280–292. doi:10.1016/j.avb.2015.09.011
- Herrmann, D. S., & McWhirter, J. J. (2003). Anger and aggression management in young adolescents: An experimental validation of the SCARE program. *Education and Treatment of Children*, 26(3), 273–302.

- Hofstede, G. (1980). *Culture's consequences: International differences in work-related values.* Beverly Hills, CA: Sage.
- Hosseini, S. H., Mokhberi, V., Mohammadpour, R. A., Mehrabianfard, M., & Lashak, N. B. (2011). Anger expression and suppression among patients with essential hypertension. *International Journal of Psychiatry in Clinical Practice*, *15*(3), 214–218. doi:10.3109/13651501.2011.572168
- Hovey, J. D., Rojas, R. B., Kain, C., & Magaña, C. (2000). Proposition 187 reexamined: Attitudes toward immigration among California voters. *Current Psychology: A Journal for Diverse Perspectives on Diverse Psychological Issues*, 19(3), 159–174. doi:10.1007/s12144-000-1013-9
- Howells, K., & Day, A. (2003). Readiness for anger management: Clinical and theoretical issues. *Clinical Psychology Review*, 23(2), 319–337. doi:10.1016/S0272-7358(02)00228-3
- Johns, A. L., Newcomb, M. D., Johnson, M. D., & Bradbury, T. N. (2007). Alcohol-related problems, anger, and marital satisfaction in monoethnic Latino, biethnic Latino, and European American newlywed couples. *Journal of Social and Personal Relationships*, 24(2), 255–275. doi:10.1177/0265407507075413
- Kumpfer, K. L., Alvarado, R., Smith, P., & Bellamy, N. (2002). Cultural sensitivity and adaptation in family-based prevention interventions. *Prevention Science*, *3*(3), 241–246. doi:10.1023/A:1019902902119
- Lee, A. H., & DiGiuseppe, R. (2018). Anger and aggression treatments: A review of metaanalyses. *Current Opinion in Psychology, 19*, 65–74. doi:10.1016/j.copsyc.2017.04.004
- Levesque, D. A., Johnson, J. L., & Prochaska, J. M. (2017). Teen Choices, an online stage-based program for healthy, nonviolent relationships: Development and feasibility trial. *Journal of School Violence*, *16*(4), 376–385. doi:10.1080/15388220.2016.1147964
- Lucier-Greer, M., Adler-Baeder, F., Harcourt, K. T., & Gregson, K. D. (2014). Relationship education for stepcouples reporting relationship instability—Evaluation of the Smart Steps: Embrace the Journey curriculum. *Journal of Marital and Family Therapy*, 40(4), 454–469. doi:10.1111/jmft.12069
- Mackintosh, M., Morland, L. A., Kloezeman, K., Greene, C. J., Rosen, C. S., Elhai, J. D., & Frueh, B. C. (2014). Predictors of anger treatment outcomes. *Journal of Clinical Psychology*, 70(10), 905–913. doi:10.1002/jclp.22095
- Margolin, G. (1979). Conjoint marital therapy to enhance anger management and reduce spouse abuse. *The American Journal of Family Therapy*, 7(2), 13–23. doi:10.1080/01926187908250 312
- Michigan State University Extension. (2012). *RELAX: Alternatives to anger*. Lansing, MI: Michigan State University Extension.
- Morland, L. A., Greene, C. J., Rosen, C. S., Foy, D., Reilly, P., Shore J., He, Q., & Frueh, B. C. (2010). Telemedicine for anger management therapy in a rural population of combat veterans with posttraumatic stress disorder: A randomized noninferiority trial. *Journal of Clinical Psychiatry*, 71(7), 855–863. doi:10.4088/JCP.09m05604blu

- Nastasi, B. K., & Schensul, S. L. (2005). Contributions of qualitative research to the validity of intervention research. *Journal of School Psychology*, 43(3), 177–195. doi:10.1016/j.jsp.2005.04.003
- Nelson, S., & Olcott, L. (2006). Jail time is learning time. Corrections Today, 68(1), 26–37.
- Nowell, L. S., Norris, J. M., White, D. E., & Moules, N. J. (2017). Thematic analysis: Striving to meet the trustworthiness criteria. *International Journal of Qualitative Methods*, 16, 1–13. doi:1609406917733847
- Parra-Cardona, J. R., & Busby, D. M. (2006). Exploring relationship functioning in premarital Caucasian and Latino/a couples: Recognizing and valuing cultural differences. *Journal of Comparative Family Studies*, *37*(3), 345–359. doi:10.3138/jcfs.37.3.345
- Percival, G. L. (2010). Ideology, diversity, and imprisonment: Considering the influence of local politics on racial and ethnic minority incarceration rates. *Social Science Quarterly*, *91*(4), 1063–1082. doi:10.1111/j.1540-6237.2010.00749.x
- Pierce, L. L., Pierce, S. W., & Gies, C. E. (2013). Choices: Anger and anger management in rehabilitative care. *Rehabilitation Nursing*, *38*(2), 80–87. doi:10.1002/rnj.71
- Pish, S., Clark-Jones, T., Eschbach, C., & Tiret, H. (2016). Anger management program participants gain behavioral changes in interpersonal relationships. *Journal of Extension*, 54(5), Article 5FEA3. Retrieved from https://joe.org/joe/2016october/a3.php
- Potter-Efron, R. T. (2005). *Handbook of anger management: Individual, couple, family, and group approaches.* Binghamton, NY: Haworth Clinical Practice Press.
- QSR International. (2016). NVivo 10 [Computer software]. Cambridge, MA: QSR International.
- Radina, M. E., Wilson, S. M., & Hennon, C. B. (2009). Parental stress among U.S. Mexican heritage parents: Implications for culturally relevant family life education. In R. L. Dalla, J. DeFrain, J. M. Johnson, & D. A. Abbott (Eds.), Strengths and challenges of new immigrant families: Implications for research, policy, education, and service (pp. 369–391). Lanham, MD: Lexington Books.
- Raval, V. V., Raval, P. H., & Becker, S. P. (2012). "He cursed, and I got angry:" Beliefs about anger among adolescent male offenders in India. *Journal of Child and Family Studies*, 21(2), 320–330. doi:10.1007/s10826-011-9478-8
- Reck, K. L. (2013). Evaluating the Smart Steps for Stepfamilies: Embrace the Journey program, a hierarchical examination (Doctoral dissertation). Utah State University Digital Commons. Retrieved from https://digitalcommons.usu.edu/cgi/viewcontent.cgi?article=3043&context=etd
- Reck, K., Higginbotham, B., Skogrand, L., & Davis, P. (2012). Facilitating stepfamily education for Latinos. *Marriage & Family Review*, 48(2), 170–187. doi:10.1080/01494929.2011.631729
- Rios V. M. (2007). The hypercriminalization of Black and Latino male youth in the era of mass incarceration. In M. Marable, I. Steinberg, & K. Middlemass (Eds.), *Racializing justice, disenfranchising lives: The racism, criminal justice, and law reader* (pp. 17–33). New York, NY: Palgrave Macmillan.

- Sabogal, F., Marin, G., Otero-Sabogal, R., Marin, B. V., & Perez-Stable J. (1987). Hispanic familism and acculturation: What changes and what doesn't? *Hispanic Journal of Behavioral Science*, *9*(4), 397–412. doi:10.1177/07399863870094003
- Santiago-Rivera, A. L., Arredondo, P., & Gallardo-Cooper, M. (2002). *Counseling Latinos and la familia: A practical guide*. Thousand Oaks, CA: Sage.
- Skogrand, L., Barrios-Bell, A., & Higginbotham, B. (2009). Stepfamily education for Latino families: Implications for practice. *Journal of Couple & Relationship Therapy*, 8(2), 113–128. doi:10.1080/15332690902813802
- Skogrand, L., Hatch, D., & Singh, A. (2008). Strong marriages in Latino culture. In R. Dalla, J. DeFrain, J. Johnson, & D. Abbott (Eds.), *Strengths and challenges of new immigrant families: Implications for research, policy, education, and service* (pp. 117–134). Lanham, MA: Lexington Books.
- Skogrand, L., Reck, K. H., Higginbotham, B., Adler-Baeder, F., & Dansie, L. (2010). Recruitment and retention for stepfamily education. *Journal of Couple & Relationship Therapy*, *9*(1), 48–65. doi:10.1080/15332690903473077
- Skogrand, L., Torres, E., Higginbotham, B. J. (2010). Stepfamily education: Benefits of a group-formatted intervention. *The Family Journal: Counseling and Therapy for Couples and Families*, 18(3), 234–240. doi:10.1177/1066480710372479
- Sorkin, D., Rook, K. S., & Lu, J. L. (2002). Loneliness, lack of emotional support, lack of companionship, and the likelihood of having a heart condition in an elderly sample. *Annals of Behavioral Medicine*, 24(4), 290–298. doi:10.1207/S15324796ABM2404_05
- Stern, S. B. (1999). Anger management in parent-adolescent conflict. *The American Journal of Family Therapy*, 27(2), 181–193. doi:10.1080/019261899262050
- Taylor, R. W. (2010). The role of teacher education programs in creating culturally competent teachers: A moral imperative for insuring the academic success of diverse student populations. *Multicultural Education*, 17(3), 24–28.
- Thomas, S. P. (2001). Teaching healthy anger management. *Perspectives in Psychiatric Care*, 37(2), 41–48. doi:10.1111/j.1744-6163.2001.tb00617.x
- Walker, J., & Bowes, N. (2013). The evaluation of violent thinking in adult offenders and non-offenders using the Maudsley Violence Questionnaire. *Criminal Behaviour and Mental Health*, 23(2), 113–123. doi:10.1002/cbm.1861
- Watt, B. D., & Howells, K. (1999). Skills training for aggression control: Evaluation of an anger management programme for violent offenders. *Legal and Criminological Psychology*, 4(2), 285–300. doi:10.1348/135532599167914
- Williams, D. R., Neighbors, H. W., & Jackson, J. S. (2003). Racial/ethnic discrimination and health: Findings from community studies. *American Journal of Public Health*, 93(2), 200–208. doi:10.2105/AJPH.93.2.200
- Yekta, M. S., Zamani, N., Parand, A., & Zardkhaneh, S. A. (2011). The effectiveness of anger management training on parents' anger expression and control. *Developmental Psychology: Journal of Iranian Psychologists*, 7(26), 137–146.

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