

## Anger

In response to being criticized or ignored, or when overwhelmed with daily hassles, people often feel irritated, annoyed or angry. This is a normal reaction. In fact, when anger is experienced and expressed appropriately, it can lead to healthy coping and constructive change. On the other hand, frequent, intense, and enduring anger can be quite harmful.

Anger is not limited to shouting and yelling. Angry individuals may become intimidating and aggressive. They may hurt themselves, others, or property. Extreme anger may lead to problems with the law. Also, some individuals feel badly about their anger leading to guilt reactions. Angry individuals may not show their anger outwardly. Rather, it remains inside and they harbor fantasies of "getting even." Uncontrolled and excessive anger causes problems in all areas of life. It can result in relationship problems with friends, family, or coworkers.

Some reactions to angry are immediate. For example, others may avoid angry individuals since it is unpleasant to be the recipient of anger. Angry individuals may themselves suffer from headaches, stomach problems, and so on. Other consequences of anger may emerge over the longer term. Angry individuals may develop habit of withdrawal, sulking, and brooding. They may experience anguish and inner turmoil. They tend to develop lower self-esteem, more anxiety, and more alcohol and drug abuse than people who are less angry. Uncontrolled anger may eventually lead to heart disease, elevated blood pressure, and cancer, as well as to relationship and work problems.

### *Anger Treatment*

Counseling or psychotherapy can help you (or others in your life) deal with an anger problem. In seeking therapy, you may wish to consider several general issues. First, realize that anger is a common and sometimes normal human emotion. It is sometimes appropriate to be angry. But, when exaggerated, uncontrolled, or linked with dysfunctional behavior anger becomes a problem that can affect all areas of life. Second, note that angry behavior patterns are habits that are developed and repeated over a lifetime. Fortunately, these habits can be changed. Much anger is an automatic emotional response and with practice it can be reduced. Thus, it is important to ask prospective therapists how techniques for anger management will be learned and practiced. Third, if you have concerns regarding the confidentiality of treatment, discuss these issues with your therapist. Since laws vary from state to state, your therapist would be in the best position to explain the doctor-patient privilege. You should be aware that therapists, to prevent harm, may warn a potential victim of aggression if a client intends to hurt someone. This is a normal professional procedure.

### *Approaches to Anger Therapy*

There are many different approaches a therapist may use to help an individual control anger. For example, some people may benefit from exploring their family backgrounds and others may be helped with medication. Of importance, you should know that cognitive behavior therapy techniques have been shown to be highly effective for anger reduction and often represent the treatment of choice. Not everyone, of course, will find every technique to be useful. Therapists base the use of each technique on a careful evaluation of the client's circumstances and characteristics.

Several effective cognitive behavioral techniques are outlined below:

#### *Enhanced Personal Awareness*

Angry individuals often do not have a clear sense of their anger. They don't understand where it comes from, and what is happening to them when they are angry. There are many

ways you can learn about the elements of anger episodes. These include detailed discussions with your therapist, role-playing of anger causing situations, and self-monitoring (making a record of) anger in day-to-day living. Whatever approach is chosen, the goal is to help you become more aware of the anger in your life, by addressing the following issues:

- Where and when does the anger occur?
- Why does anger occur (what events or situations lead to the anger)?
- What kinds of memories or images trigger the anger?
- How do you feel when you become angry (emotionally and physically)?
- What are you thinking when you are angry?
- How do you handle the aversive situation?
- Do you always behave the same way? If not, why not?
- What do others do when you become angry?

Answering such questions will help you become aware of the nature, reasons, and results of anger. The answers will also eventually help you develop a greater sense of self-worth and personal control, and the ability to use anger management and problem solving skills. Although enhanced personal awareness is rarely all that is needed, it is often very helpful.

#### *Anger Disruption by Avoidance and Removal*

These techniques lead to interruption of anger by removing you, mentally or physically, from the situation. For example, it might be wise to simply get up and leave a situation when anger develops. This might even be negotiated with a spouse, friend, or business associate in advance. It might be wise to delay responding by asking for time to think about angering issues or to gather additional information before responding. It might be wise to seek an alternative mode of response, such as a written or email answer, instead of an immediate spoken one. These techniques may decrease or even prevent the anger altogether.

Doing a distracting non-angry activity is also an alternative. One mother, with an anger problem, chose to plan meals and do the laundry instead of arguing and insulting her teenage daughter about homework. Other individuals may count to ten, or may provide themselves with a brief, nondamaging physical distraction such as pressing their fingers together very firmly or leaving to take a shower or work in the garden.

Although these are only a few examples, they are simple strategies that can disrupt anger and give the individual some time and distance to calm down. They can then approach the situation differently at a later time. As with enhanced self-awareness, these strategies are rarely sufficient alone, but are an important part of treatment.

#### *Relaxation Coping Skills*

Anger is often marked by increased emotional and physical excitement. Relaxation coping skills target this excitement and can help you learn how to calm down when angered. You can learn to become aware of the triggers for anger and relaxation can be used to lower it. Relaxation skills include slow deep breathing, slowly repeating a calm word or phrase, picturing a personal relaxation image, or focusing on muscle tension and consciously letting it go. These skills are practiced at home until you can relax quickly. Then, as you become better at using relaxation, it can be used to lower anger within the therapy session. For example, the therapist may ask you to imagine an angering event, experience the anger, and then assist you to use relaxation skills to lower the anger. Over the course of a few sessions, as the therapist's

assistance decreases, you can learn to handle increasing levels of anger. If successful in the therapy sessions, you can begin to use relaxation for anger management in daily living, freeing yourself to approach situations more calmly.

### *Attitude and Cognitive Change*

When angry, people often make bad situations worse by the way they think about them. For example, angry individuals tend to *demand* that things should be, ought to be, or have to be, their way - rather than just *wanting* or *preferring* them to be a certain way. Often, they call other people insulting and sometimes obscene names. The problem situation is often seen as *awful* or *catastrophic*, rather than simply *difficult*, *frustrating*, and truly *disappointing*. By thinking about bad situations in this way, natural frustrations, hurts, and disappointments seem much larger than actually are, leading to increases in anger.

Attitude and cognitive change techniques focus on identifying anger producing thoughts and replacing them with more reasonable ways of thinking. As with relaxation skills, many different techniques may be employed. For example, careful exploration of thinking errors, role-playing, self-monitoring and self-debating strategies, and trying out new behaviors are some of the techniques available to therapists. Whatever specific strategies are chosen, you and your therapist work together in session to become aware of, and change, attitudes and images that increase anger. Then, the new and more reasonable thought patterns (habits) for anger reduction are practiced in the real world.

### *Silly Humor*

Another cognitive change technique is silly humor. This does not mean that you will be taught to laugh away problems. Instead, the goal is to use silly humor, rather than hostility, as a partial cure. This is particularly helpful with certain types of angering thoughts. For example, adult drivers may make themselves angrier by calling other drivers “asses.” The client might be asked to define this term correctly. This usually leads to a definition of burro. Then, they might be asked to draw a picture of this definition and to picture this image when they use the term. Rarely is silly humor the primary therapy technique, but it often helps people chuckle at themselves, take a mental step back, and approach the situation in a less angry way.

### *Acceptance and Forgiveness*

Many things that others do simply can not be helped. For example, because of poor motor control children do often spill drinks at a restaurant. As part of their natural development, they commonly argue with each other, then and pout or shout. In industry, realistic economic conditions do sometimes lead to layoffs, which even management does not want. Marital partners do sometimes forget about issues that are important to their spouses, because of personal medical or work preoccupations. Thinking that others have intentionally or purposely set out to cause problems is often wrong. Thinking that they could have acted differently if they really wanted to, ignores other causes of behavior. Sometimes, for example, spouses or colleagues just don't hear what you say because of hearing loss. Thinking that the bad behavior of others is always intentional just increases anger and does little to solve problems. Understanding that some behaviors are caused by biology or genetics, or normal development, or economic stressors, is more realistic. Acceptance and forgiveness interventions help you to understand these realities. The goal is to improve relations with others, while reducing needless and repetitive lecturing and blaming.

### *Skill Enhancement*

Some people experience anger because they do not have the necessary skills to negotiate common interpersonal hassles and conflicts. They may fight with a spouse because

they don't know how to communicate well about family budgets; become furious and yell at a child because they don't know how to handle the child's misbehavior; or become angry and intimidating when dealing with coworkers because they don't know how to be assertive. Anger escalates because of insufficient skill at resolving the situation.

Although the needed skills vary greatly from individual to individual, skill training can help you approach negative situations in a calm, direct, problem-solving manner. You and your therapist identify the needed skills and rehearse them during therapy sessions until you are comfortable with them. Then, you work together to transfer these skills from the office into the real world. Over time, you will learn general principles and strategies that can be adapted to many anger causing situations. This leads to a reduction in anger because the skills stop or lessen conflict and tension with others.

### *Summary*

Although frustration and a degree of anger are inevitable parts of life, individuals don't have to be victims of uncontrolled, intense or frequent anger. A number of effective cognitive-behavioral techniques are available for anger management. No one is likely to need all of them. However, psychotherapy can identify how these strategies might be combined to reduce anger, in order to help you and others in your life deal with this troublesome emotion.

### *What Is Behavior Therapy?*

Behavior Therapy is a particular type of psychological treatment that is based firmly on research findings. It aids people in achieving specific changes or goals.

Goals might involve:

- An improved way of acting: like trying not to shout or push others;
- An improved way of thinking: like understanding that most bad situations aren't catastrophic, learning to problem-solve and get rid of self-defeating thoughts, rather than to blame others;
- An improved way of dealing with physical or medical problems: like controlling the advance reactions due to pain or helping a person stick to a doctor's suggestions; or
- A way of coping: like training people to see the cause of their anger before becoming angry and to accept the, sometimes, negative reality of life.

Behavior Therapists and Cognitive Behavior Therapists usually focus on the current situation, rather than the past. They concentrate on a person's views and beliefs about their life, not on personality traits. Behavior Therapists and Cognitive Behavior Therapists treat individuals, parents, children, couples, and whole families.

Replacing ways of living that do not work well with ways of living that do work, and giving people more control over their lives are common goals of behavior therapy. The development of goals and improved habits is done collaboratively, so that clients and therapists agree on the best course of action.

### *How to get help*

If you are looking for help with anger, either for yourself or someone else, you may be tempted to call someone who advertises in a local publication or who comes up from a search of the internet. You may, or may not, find a competent therapist in this manner. It is wise to check on the credentials of a psychotherapist who you might consider seeing. It is expected that competent therapists hold advanced academic degrees and are trained in anger management techniques. They should be listed as members of professional organizations such as the Association for Behavioral and Cognitive Therapy, the American Psychological Association, and

so on. Of course, they should be licensed to practice in your state. You can find competent anger management specialists who are affiliated with local universities or mental health facilities, or who are listed on the web sites of professional organizations.

### **What Is Cognitive Behavior Therapy?**

Behavior Therapy and Cognitive Behavior Therapy are types of treatment that are based firmly on research findings. These approaches aid people in achieving specific changes or goals.

Changes or Goals might involve:

- a way of acting - like smoking less or being more outgoing;
- a way of feeling - like helping a person be less scared, less depressed, or less anxious;
- a way of thinking - like learning to problem-solve or get rid of self-defeating thoughts;
- a way of dealing with physical or medical problems - like lessening back pain or helping a person stick to a doctor's suggestions; or
- a way of adjusting - like training developmentally disabled people to care for themselves or hold a job.

Behavior Therapists and Cognitive Behavior Therapists usually focus more on the current situation and its solution, rather than the past. They concentrate on a person's views and beliefs about their life, not on personality traits. Behavior Therapists and Cognitive Behavior Therapists treat individuals, parents, children, couples, and families. Replacing ways of living that do not work well, with ways of living that work, and giving people more control over their lives are common goals of behavior and cognitive behavior therapy.

The Association for Behavioral and Cognitive Therapies (ABCT) is an interdisciplinary organization committed to the advancement of a scientific approach to the understanding and amelioration of problems of the human condition. These aims are achieved through the investigation and application of behavioral, cognitive, and other evidence-based principles to assessment, prevention, and treatment.

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