

Anger management

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The term **Anger management** commonly refers to a system of psychological therapeutic techniques and exercises by which someone with excessive or uncontrollable anger can control or reduce the triggers, degrees, and effects of an angered emotional state.

One technique for controlling anger is finding agreement with another person rather than a conflict. In some countries, courses in anger management may be mandated by their legal system.

The use of deep breathing and meditation can be used as a means of relaxation. Other interventions include learning empathy, stress management skills, forgiveness, changing how you speak about yourself or others and improving optimism. As the issue of anger varies from person to person, the treatments are designed to be personal to the individual.

Anger in modern society

In modern society, anger is viewed as an immature or uncivilized response to frustration, threat, violation, or loss. Conversely, keeping calm, coolheaded, or turning the other cheek is considered more socially acceptable. This conditioning can cause inappropriate expressions of anger such as uncontrolled violent outbursts, misdirected anger or repressing all feelings of anger when it would be an appropriate response to the situation. Also, anger that is constantly "bottled up" can lead to persistent violent thoughts or actions[1], nightmares and even physical symptoms[2]. Anger can also aggravate an already present mental health problem such as clinical depression.

Many people believe that depression is in fact anger turned inwards. This is because many depressed people react to stress by turning their anger inward as a response to physical or mental abuse or neglect from parents or others. One secondary effect of the depression sufferer's denial of anger is that their interpersonal relationships are often unhappy and unhealthy.

Another side-effect of anger is that it can fuel obsessions, phobias, addictions and manic tendencies. Many people who are not able to express their anger will let it out in some sort of furious activity which can result in clinical depression or even bipolar disorder. Anger can also fan the flames of paranoia and prejudice, even in normal, everyday situations. People tend to express their anger either passively or aggressively through the fight-or-flight response. The passive "flight" response is repression and denial of anger for safety. However, aggressive behavior is associated with the "fight" response and the use of the verbal and physical power of anger to abuse and hurt others.

An alternative view

The words anger and rage are often imagined to be at opposite ends of an emotional continuum, mild irritation and annoyance at one end and fury or murderous rage at the other; the two are inextricably linked in the English language with one referring to the other in most dictionary definitions. Recently, Sue Parker Hall (2008) [3] has challenged this idea; she conceptualises anger as a positive, pure and constructive emotion, that is always respectful of others; only ever utilised to protect the self on physical, emotional, intellectual and spiritual dimensions in relationships. She argues that anger originates at age 18 months to 3 years in order to provide the motivation and energy for the individuation developmental stage whereby a child begins to separate from their carers and assert their differences. Anger emerges at the same time as thinking is developing therefore it is always possible to access cognitive abilities and feel anger at the same time.

Parker Hall (2008)[4]proposes that it is not anger that is problematic but rage, a different phenomenon entirely; rage is conceptualised as a pre-verbal, pre-cognition, psychological defence mechanism which originates in earliest infancy as a response to the trauma experienced when the infant's environment fails to meet their needs. Rage is construed as an attempt to summon help by an infant who experiences terror and whose very survival feels under threat. The infant cannot manage the overwhelming emotions that are activated and need a caring other to attune to them, to accurately assess what their needs are, to comfort and soothe them. If they receive sufficient support in this way, infants eventually learn to process their own emotions. Rage problems are conceptualised as 'the inability to process emotions or life's experiences' (ibid) either because the capacity to regulate emotion (Schore, 1994) [5] has never been sufficiently developed (most common) or because it has been temporarily lost due to more recent trauma. Rage is understood as 'a whole load of different feelings trying to get out at once' (Harvey, 2004)[6] or as raw,

undifferentiated emotions, which spill out when one more life event that cannot be processed, no matter how trivial, puts more stress on the organism than they can bear.

Framing rage in this way has implications for working therapeutically with individuals with such difficulties. If rage is accepted as a pre-verbal, pre-cognitive phenomenon (and most sufferers describe it colloquially as 'losing the plot') then it follows that cognitive strategies, eliciting commitments to behave differently or educational programmes (the most common forms of interventions in the UK presently) are contra-indicated. Parker Hall proposes an empathic therapeutic relationship to support clients to develop or recover their organismic capacity (Rogers, 1951)[7] to process their often multitude of traumas (unprocessed life events). This approach is a critique of the dominant anger and rage interventions in the UK including probation, prison and psychology models, which she argues does not address rage at a deep enough level.

SYMPTOMS OF ANGER

Anger can be of one of two main types: **Passive anger** and **Aggressive anger**. These two types of anger have some characteristic symptoms:

Passive anger

Passive anger can be expressed in the following ways:

Secretive behavior, such as stockpiling resentments that are expressed behind people's backs, giving the silent treatment or under the breath mutterings, avoiding eye contact, putting people down, gossiping, anonymous complaints, poison pen letters, stealing, and conning.

Manipulation, such as provoking people to aggression and then patronizing them, forgiveness, provoking aggression but staying on the sidelines, emotional blackmail, false tearfulness, feigning illness, sabotaging relationships, using sexual provocation, using a third party to convey negative feelings, withholding money or resources.

Self-blame, such as apologizing too often, being overly critical, inviting criticism.

Self-sacrifice, such as being overly helpful, making do with second best, quietly making long suffering signs but refusing help, or lapping up gratefulness.

Ineffectualness, such as setting yourself and others up for failure, choosing unreliable people to depend on, being accident prone, underachieving, sexual impotence, expressing frustration at insignificant things but ignoring serious ones.

Dispassion, such as giving the cold shoulder or phony smiles, looking cool, sitting on the fence while others sort things out, dampening feelings with substance abuse, overeating, oversleeping, not responding to another's anger, frigidity, indulging in sexual practices that depress spontaneity and make objects of participants, giving inordinate amounts of time to machines, objects or intellectual pursuits, talking of frustrations but showing no feeling.

Obsessive behavior, such as needing to be clean and tidy, making a habit of constantly checking things, over-dieting or overeating, demanding that all jobs be done perfectly.

Evasiveness, such as turning your back in a crisis, avoiding conflict, not arguing back, becoming phobic.

Aggressive anger

The symptoms of aggressive anger are:

Threats, such as frightening people by saying how you could harm them, their property or their prospects, finger pointing, fist shaking, wearing clothes or symbols associated with violent behaviour, tailgating, excessively blowing a car horn, slamming doors.

Hurtfulness, such as physical violence, verbal abuse, biased or vulgar jokes, breaking a confidence, using foul language, ignoring people's feelings, willfully discriminating, blaming, punishing people for unwarranted deeds, labeling others.

Destructiveness, such as destroying objects, harming animals, destroying a relationship between two people, reckless driving, substance abuse.

Bullying, such as threatening people directly, persecuting, pushing or shoving, using power to oppress, shouting, using a car to force someone off the road, playing on people's weaknesses.

Unjust blaming, such as accusing other people for your own mistakes, blaming people for your own feelings, making general accusations.

Manic behavior, such as speaking too fast, walking too fast, working too much and expecting others to fit in, driving too fast, reckless spending.

Grandiosity, such as showing off, expressing mistrust, not delegating, being a sore loser, wanting center stage all the time, not listening, talking over people's heads, expecting kiss and make-up sessions to solve problems.

Selfishness, such as ignoring other's needs, not responding to requests for help, queue jumping.

Vengeance, such as being over-punitive, refusing to forgive and forget, bringing up hurtful memories from the past.

Unpredictability, such as explosive rages over minor frustrations, attacking indiscriminately, dispensing unjust punishment, inflicting harm on others for the sake of it, using alcohol and drugs[8], illogical arguments.

It should be stated that anyone displaying any of these behaviours does not always have an anger management problem.

METHODS OF ANGER MANAGEMENT

Psychologists recommend a balanced approach to anger, which both controls the emotion and allows the emotion to express itself in a healthy way. Some descriptions of actions of anger management are:

Direct, such as not beating around the bush, making behaviour visible and conspicuous, using body language to indicate feelings clearly and honestly, anger directed at persons concerned.

Honorable, such as making it apparent that there is some clear moral basis for the anger, being prepared to argue your case, never using manipulation or emotional blackmail, never abusing another person's basic human rights, never unfairly hurting the weak or defenseless, taking responsibility for actions.

Focused, such as sticking to the issue of concern, not bringing up irrelevant material.

Persistent, such as repeating the expression of feeling in the argument over and over again, standing your ground, self defense.

Courageous, such as taking calculated risks, enduring short term discomfort for long term gain, risking displeasure of some people some of the time, taking the lead, not showing fear of other's anger, standing outside the crowd and owning up to differences, using self-protective skills.

Passionate, such as using full power of the body to show intensity of feeling, being excited and motivated, acting dynamically and energetically, initiating change, showing fervent caring, being fiercely protective, enthusing others.

Creative, such as thinking quickly, using more wit, spontaneously coming up with new ideas and new views on subject

Forgive, such as demonstrating a willingness to hear other people's anger and grievances, showing an ability to wipe the slate clean once anger has been expressed.

Listen to what is being said to you. Anger creates a hostility filter, and often all you can hear is negatively toned.

A common skill used in most anger management programs is learning assertive communication techniques. Assertive communication is the appropriate use of expressing feelings and needs without offending or taking away the rights of others. It is typically started with the use of "I" statements followed by a need statement. For example, "I feel upset when you don't take my feelings into consideration when you talk about your past relationships. I hope you can be more thoughtful and know what you should and should not say the next time."

With regard to interpersonal anger, Dr. Eva L. Feindler[9] recommends that people try, in the heat of an angry moment, to see if they can understand where the alleged perpetrator is coming from. Empathy is very difficult when one is angry but it can make all the difference in the world. Taking the other person's point of view can be excruciating when in the throes of anger, but with practice it can become second nature. Of course, once the angry person is in conditions of considering the opposite position, then the anger based on righteous indignation tends to disappear. [10]

Buddhists, on the other hand, recommend a slightly different approach. They believe that there are several antidotes for handling anger. The chief amongst them are patience, understanding karma, equanimity and realization of emptiness (the sum of which can be achieved through daily Concentration Meditation and Insight Meditation, or Samatha and Vipassana).

The main issue of anger management is that anger is regarded as an incorrect projection of the mind, so that wisdom and insight can ultimately correct the mind and eliminate anger completely.

References

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