

## ANGER AND THERAPY FOR ANGER MANAGEMENT

“I don’t know what came over me, I just snapped.” “Suddenly, I just lost it.” “I don’t know why I get so angry about little things.” These are the kinds of statements that clients tell us, which prompts the question, “How is it possible that a person can ‘snap’ without warning?”

Anger, as a core emotion, has three elements: cognitive (being able to label the feeling as “anger;” physiological (bodily reactions), and experiential (action impulses and the felt experience).

Many patients get into difficulty because they do not correctly label, and own, their feeling as “anger.” A person may negatively judge herself for feeling angry, or think of “anger” as exploding, going ballistic, or acting in aggressive or violent ways. She is confusing anger, the emotion felt internally, with acting out or discharging the anger. “Discharging” means attempting to get rid of the anger so as to avoid the internal experience of it. Discharging anger has two big problems: First, it has negative consequences (violence, destroying property and relationships, legal involvement due to aggression or violence, the cost of replacing destroyed property, reputation loss, etc.) Secondly, it does not help to regulate the emotion. Acting out just solidifies the discharge behavior pattern, making a repeat outburst more likely. On the other hand, some people find it easier to get angry than to recognize other basic emotions, such as sadness or grief.

The reason a person “just snaps” is that they have a tendency to ignore, minimize, or dismiss their emotion; they are not paying attention to the internal feedback from their body warning them of anger building up. This is behavior learned in families, either in overt messages (“Stop your crying!” “I don’t want to hear another word out of you!”) or implicitly, by observing how their caretakers show, or don’t show, their anger. Since children are dependent on their parents, they are motivated to do what is necessary to please the parents so as to maintain their attachments. While this coping mechanism is adaptive in enabling the child to get along or survive in their family, it prevents the person from recognizing and managing feelings later in life.

The individual with a tendency to quick anger needs to learn to slow down so that he can reflect and then think about the options for what to do. The therapist can help the patient to: identify the triggers for anger; label and own the feeling; notice his internal sensations of anger before the temper builds into rage; and build the capacity to tolerate the felt experience. The patient may need the therapist’s help to turn against defenses, such as self-dismissal, that prevent emotional regulation. Since all emotions motivate behavior, a therapist can help the patient toward healthier ways -- self-assertion, for example -- to channel their anger.

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